

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

TEA PARTY PATRIOTS CITIZENS FUND

ADDRESS (number and street)

2295 TOWNE LAKE PKWY STE 116-328

Check if different
than previously
reported. (ACC)

WOODSTOCK

GA

30189

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00540898

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- ☐ April 15
Quarterly Report (Q1)
- ☐ July 15
Quarterly Report (Q2)
- ☐ October 15
Quarterly Report (Q3)
- ☐ January 31
Year-End Report (YE)
- ☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)
- ☐ Termination Report
(TER)

(b) Monthly
Report
Due On:

- ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11)
(Non-Election
Year Only)
- ☐ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12)
(Non-Election
Year Only)
- ☐ Apr 20 (M4) ☐ Jul 20 (M7) ☒ Oct 20 (M10) ☐ Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

- ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
- ☐ Convention (12C) ☐ Special (12S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of(d) 30-Day
POST-Election
Report for the:

- ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
09 01 2016

through

M M M / D D D / Y Y Y Y Y Y
09 30 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

KILGORE, PAUL, A, ,

Type or Print Name of Treasurer

Signature of Treasurer

KILGORE, PAUL, A, ,

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
10 20 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

TEA PARTY PATRIOTS CITIZENS FUND

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
09 / 01 / 2016 To: M M / D D / Y Y Y Y Y Y
09 / 30 / 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2016		86556.28
(b) Cash on Hand at Beginning of Reporting Period.....	450519.11	
(c) Total Receipts (from Line 19)	206270.05	1774438.11
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	656789.16	1860994.39
7. Total Disbursements (from Line 31).....	522721.91	1726927.14
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	134067.25	134067.25
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

TEA PARTY PATRIOTS CITIZENS FUND

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y
09	/	01	/	2016

To:

M M	/	D D	/	Y Y Y Y
09	/	30	/	2016

I. Receipts
COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

80587.00

949638.61

(ii) Unitemized

125483.05

803191.29

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

206070.05

1752829.90

(b) Political Party Committees

100.00

100.00

(c) Other Political Committees

(such as PACs).....

100.00

100.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

206270.05

1753029.90

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

2100.56

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

19307.65

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c))

206270.05

1774438.11

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

206270.05

1774438.11

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	235048.90	1106019.48
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	235048.90	1106019.48
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	287673.01	620907.66
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	522721.91	1726927.14
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	522721.91	1726927.14

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	206270.05	1753029.90
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	206270.05	1753029.90
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	235048.90	1106019.48
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	2100.56
38. Net Operating Expenditures (subtract Line 37 from Line 36)	235048.90	1103918.92

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 187

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ADAMOLI, LAVETA, , ,

Mailing Address 5947 S YATES CT

City
LITTLETONState
COZip Code
80123FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 21 / 2016

Transaction ID : SA11AI.523178

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ADAMS, CLYDE, N, ,

Mailing Address 1871 HEARST WILLITS RD

City
WILLITSState
CAZip Code
95490FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 23 / 2016

Transaction ID : SA11AI.523274

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. AGUR, PETER V, , ,

Mailing Address 30 W LAMBERT LN UNIT 217

City
TUCSONState
AZZip Code
85737FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 21 / 2016

Transaction ID : SA11AI.523179

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

225.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 187

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. AHERN, HOLLY, , ,

Mailing Address 505 BROOKHOLLOW DR

City
PALESTINEState
TXZip Code
75801FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 09 / 09 / 2016

Transaction ID : SA11AI.526238

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. AINLEY, PAT, , ,

Mailing Address P O BOX 3908

City
CRESTLINEState
CAZip Code
92325FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AINLEY ENTERPRISES LLCOccupation (for Individual)
PROPERTY MANAGEMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1700.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 09 / 20 / 2016

Transaction ID : SA11AI.526839

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ALBRECHT, GLEN, , ,

Mailing Address PO BOX 1015

City
JAMESTOWNState
NDZip Code
58402FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016

Transaction ID : SA11AI.523657

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

250.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 187

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ALDERFER, ED, , ,

Mailing Address 2449 WINDHAM DR

City

MELBOURNE

State

FL

Zip Code

32935

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NONE

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 04 / 2016

Transaction ID : SA11AI.525926

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ALDERSON, DAN R, , ,

Mailing Address 1127 BUFFALO WILSON RD

City

COLVILLE

State

WA

Zip Code

99114

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 12 / 2016

Transaction ID : SA11AI.526341

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ALLEN, HAROLD, , ,

Mailing Address 713 WAKEFIELD

City

EL PASO

State

TX

Zip Code

79922

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MMIOccupation (for Individual)
PRESIDENT

Receipt For:

☐ Primary
☐ Other (specify)

General

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2016

Transaction ID : SA11AI.526158

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

225.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 187

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ALLEN, HAROLD, , ,

Mailing Address 713 WAKEFIELD

City
EL PASO

State
TX

Zip Code
79922

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MMI

Occupation (for Individual)
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 13 / 2016

Transaction ID : SA11AI.526403

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ALLISON, BILLY E, , ,

Mailing Address 1322 MANGO AVE

City
VENICE

State
FL

Zip Code
34285

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 14 / 2016

Transaction ID : SA11AI.522466

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ANDERSON, AGNES, V., MS.,

Mailing Address 890 WIXFORD WAY

City
SACRAMENTO

State
CA

Zip Code
95864

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 30 / 2016

Transaction ID : SA11AI.523662

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

300.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 187

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ANTONICELLI, PHILIP, J, ,

Mailing Address 1860 SUMMER CLOUD DR

City
THOUSAND OAKS

State
CA

Zip Code
91362

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2016

Transaction ID : SA11AI.523663

Amount of Each Receipt this Period

125.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ARJIL, ANTHONY, , ,

Mailing Address 880 CUMORAH COURT

City
PLACERVILLE

State
CA

Zip Code
95667

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 12 / 2016

Transaction ID : SA11AI.526346

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ARVIK, JANET, , ,

Mailing Address 213 WELDON RIDGE CT.

City
DURHAM

State
NC

Zip Code
27705

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 24 / 2016

Transaction ID : SA11AI.527029

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

175.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 187

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BARONE, GLENN, , ,

Mailing Address 432 W HILL RD

City
GLEN GARDNER

State
NJ

Zip Code
08826

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MF CACHAT CO.

Occupation (for Individual)
SALES REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2016

Transaction ID : SA11AI.521736

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BATCH, JOHN, R., ,

Mailing Address 345 N PURDUE AVE

City
FRESNO

State
CA

Zip Code
93727

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2016

Transaction ID : SA11AI.522479

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BEAVERS, FARRELL M, , ,

Mailing Address 24345 HIGHWAY MM

City
DIXON

State
MO

Zip Code
65459

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2016

Transaction ID : SA11AI.521738

Amount of Each Receipt this Period

40.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

265.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BEHRENS, PAUL, D., MR.,

Mailing Address 4895 REGINA LN.

City
BEAUMONT

State
TX

Zip Code
77706

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 16 / 2016

Transaction ID : SA11AI.522728

Amount of Each Receipt this Period

70.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BENGE-HARTLEY, SHARRON, , ,

Mailing Address 550 BECKY LN.

City
WAXAHACHIE

State
TX

Zip Code
75165

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYED

Occupation (for Individual)
ARCHTECTURAL SPACEPLANNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 07 / 2016

Transaction ID : SA11AI.525983

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BENNATT, MILFORD, , ,

Mailing Address 576 APACHE TRAIL

City
CHATSWORTH

State
GA

Zip Code
30705

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

368.91

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 05 / 2016

Transaction ID : SA11AI.525942

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

195.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BERING, NELLIE M., , ,

Mailing Address 4000 GYPSY LN. UNIT 342

City
PHILADELPHIA

State
PA

Zip Code
19129

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

MM / DD / YYYY
09 / 19 / 2016

Transaction ID : SA11AI.522995

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BERNATCHEZ, ROBERT A., , ,

Mailing Address 26 MARK CIR

City
RUTLAND

State
MA

Zip Code
01543

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

MM / DD / YYYY
09 / 06 / 2016

Transaction ID : SA11AI.521900

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BERRY, CARROLL M., , ,

Mailing Address 309 GLENN DR

City
HURST

State
TX

Zip Code
76053

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
09 / 23 / 2016

Transaction ID : SA11AI.523284

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

185.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BOERSTLER, JOHN, , ,

Mailing Address PO BOX 792

City

BRECKENRIDGE

State

CO

Zip Code

80424

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SELF EMPLOYED

Occupation (for Individual)

INVESTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : SA11AI.522997

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BOLAND, JOSEPH, H., ,

Mailing Address 7904 PIPS RIDGE LN

City

BARTLETT

State

TN

Zip Code

38133

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 16 / 2016

Transaction ID : SA11AI.522734

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BOLAND, JOSEPH H., , ,

Mailing Address 2525 POTOMAC AVE NE

City

ATLANTA

State

GA

Zip Code

30305

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 26 / 2016

Transaction ID : SA11AI.523448

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BOLINE, RONALD, , ,

Mailing Address 1031 HIGHLANDS PLAZA DR WEST APT 4

City
SAINT LOUIS

State
MO

Zip Code
63110

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

MM / DD / YYYY
09 / 12 / 2016

Transaction ID : SA11AI.526349

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BORELLI, ANDREW, , ,

Mailing Address 2222 MAYNARD AVE

City
UTICA

State
NY

Zip Code
13502

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NOT EMPLOYED

Occupation (for Individual)
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

MM / DD / YYYY
09 / 11 / 2016

Transaction ID : SA11AI.526306

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BORELLI, ANDREW, , ,

Mailing Address 2222 MAYNARD AVE

City
UTICA

State
NY

Zip Code
13502

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NOT EMPLOYED

Occupation (for Individual)
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY
09 / 24 / 2016

Transaction ID : SA11AI.527023

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

125.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BRANDT, STEVE, , ,

Mailing Address 1319 UMPQUA RD.

City
WOODBURN

State
OR

Zip Code
97071

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 08 / 2016

Transaction ID : SA11AI.526149

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BRAUCH, PAUL A, , ,

Mailing Address PO BOX 722

City
LE MARS

State
IA

Zip Code
51031

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 14 / 2016

Transaction ID : SA11AI.522488

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BREEDEN, SAMUEL, , ,

Mailing Address 5051 GATSBY CIRCLE

City
ROCK HILL

State
SC

Zip Code
29732

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 15 / 2016

Transaction ID : SA11AI.526578

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

2125.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BREWER, DAVID, H., ,

Mailing Address 321 E PARTRIDGE AVE.

City
INDEPENDENCE

State
MO

Zip Code
64055

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 20 / 2016

Transaction ID : SA11AI.526842

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BRITT, CARL, , ,

Mailing Address 1807 IROQUOIS COURT

City
MURFREESBORO

State
TN

Zip Code
37127

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 01 / 2016

Transaction ID : SA11AI.525844

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BRITT, CARL, , ,

Mailing Address 1807 IROQUOIS COURT

City
MURFREESBORO

State
TN

Zip Code
37127

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

355.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2016

Transaction ID : SA11AI.526056

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

75.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BRITT, CARL, , ,

Mailing Address 1807 IROQUOIS COURT

City
MURFREESBORO

State
TN

Zip Code
37127

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NONE

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

09 / 08 / 2016

Transaction ID : SA11AI.526155

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BRITT, CARL, , ,

Mailing Address 1807 IROQUOIS COURT

City
MURFREESBORO

State
TN

Zip Code
37127

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NONE

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.00

Date of Receipt

09 / 15 / 2016

Transaction ID : SA11AI.526579

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BRITT, CARL, , ,

Mailing Address 1807 IROQUOIS COURT

City
MURFREESBORO

State
TN

Zip Code
37127

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NONE

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

430.00

Date of Receipt

09 / 22 / 2016

Transaction ID : SA11AI.526914

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BROOKS, CONNIE, L., ,

Mailing Address 20124 E AMERICAN AVE

City
REEDLEY

State
CA

Zip Code
93654

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 16 / 2016

Transaction ID : SA11AI.526642

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BROWN, LARRY, , ,

Mailing Address 801 BRENTWOOD PT.

City
NAPLES

State
FL

Zip Code
34110

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 16 / 2016

Transaction ID : SA11AI.526646

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BRYDEN, ELIZABETH MDT, , ,

Mailing Address 1 W 67TH ST APT 611

City
NEW YORK

State
NY

Zip Code
10023

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3565.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 29 / 2016

Transaction ID : SA11AI.527100

Amount of Each Receipt this Period

1555.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2255.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BURKE, DAVI, , ,

Mailing Address 2171 VIRGINIA LAKE WAY

City
RENO

State
NV

Zip Code
89509

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 11 / 2016

Transaction ID : SA11AI.526313

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BURNS, GARY, , ,

Mailing Address 828 N 25TH TER

City

CORNELIUS

State

OR

Zip Code

97113

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2016

Transaction ID : SA11AI.526908

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BURYLO, VICTOR, P., MR.,

Mailing Address 2970 MCKAY RD

City

DELTA

State

AL

Zip Code

36258

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2016

Transaction ID : SA11AI.522189

Amount of Each Receipt this Period

210.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

310.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BUZBEE, JACK, , ,

Mailing Address 200 E DOUGLAS ST

City
DE SOTOState
ILZip Code
62924FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 07 / 2016

Transaction ID : SA11AI.526016

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BUZBEE, JACK, , ,

Mailing Address 200 E DOUGLAS ST

City
DE SOTOState
ILZip Code
62924FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 22 / 2016

Transaction ID : SA11AI.526898

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BYRNES, THOMAS, , ,

Mailing Address 214 VISTA LUNA DR

City
DAVIEState
FLZip Code
33325FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 14 / 2016

Transaction ID : SA11AI.522492

Amount of Each Receipt this Period

40.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

190.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 22 OF 187

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CAMPBELL, ROBERT L., , ,

Mailing Address 215 W. AVIATION CIR.

City
SALEMState
INZip Code
47167FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 06 / 2016

Transaction ID : SA11AI.521916

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CAMPBELL, JERRY, , MR,

Mailing Address 33 NORTHRIDGE DR

City
SAINT JOSEPHState
MOZip Code
64506FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 16 / 2016

Transaction ID : SA11AI.522745

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CAMPBELL, CRAIG, ROSS, ,

Mailing Address 1361 ROCKY POINT DR

City
OCEANSIDEState
CAZip Code
92056FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : SA11AI.526812

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

800.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 OF 187

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CAMPBELL, JOSEPH, P, ,

Mailing Address 4661 MORNINGSIDE DR

City
CLEVELAND

State
OH

Zip Code
44109

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PICCADILLY'S FINE ART GALLERIES

Occupation (for Individual)
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 21 / 2016

Transaction ID : SA11AI.526847

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CAMPBELL, CRAIG, ROSS, ,

Mailing Address 1361 ROCKY POINT DR

City
OCEANSIDE

State
CA

Zip Code
92056

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 24 / 2016

Transaction ID : SA11AI.527013

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CANNON, JOHN, , ,

Mailing Address 22 AUDUBON ST.

City
NEW BRITAIN

State
CT

Zip Code
06053

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2016

Transaction ID : SA11AI.526182

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 OF 187

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CANNON, JOHN, , ,

Mailing Address 22 AUDUBON ST.

City
NEW BRITAIN

State
CT

Zip Code
06053

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2016

Transaction ID : SA11AI.526945

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CARSON, JOHN, , ,

Mailing Address 696 ROSEWOOD LN

City
LAYTON

State
UT

Zip Code
84041

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2016

Transaction ID : SA11AI.526239

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CARTER, BEVERLY T., , ,

Mailing Address PO BOX 328

City
FORT SUMNER

State
NM

Zip Code
88119

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 15 / 2016

Transaction ID : SA11AI.521054

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

700.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 OF 187

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CASEY, JAMES P, , ,

Mailing Address 283 SAN REMO ST

City
PALM DESERT

State
CA

Zip Code
92260

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 16 / 2016

Transaction ID : SA11AI.522752

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CATLIN, ROBERT, , ,

Mailing Address 3236 PAGE AVENUE UNIT 302

City
VIRGINIA BEACH

State
VA

Zip Code
23451

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2016

Transaction ID : SA11AI.526457

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CATLIN, ROBERT, , ,

Mailing Address 3236 PAGE AVENUE UNIT 302

City
VIRGINIA BEACH

State
VA

Zip Code
23451

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 23 / 2016

Transaction ID : SA11AI.526996

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CHAPPELL, MARGARET, , ,

Mailing Address 22 PRINCETON CT

City

BASKING RIDGE

State

NJ

Zip Code

07920

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NONE

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4150.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 15 / 2016

Transaction ID : SA11AI.521051

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CHEN, CLARO, , ,

Mailing Address 19348 EMPTYSADDLE RD, PO BX 2105

City

WALNUT

State

CA

Zip Code

91788

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

D.H.S.

Occupation (for Individual)

FEDERAL EMPLOYEE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 25 / 2016

Transaction ID : SA11AI.527032

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CHRIST, HOWARD G, , ,

Mailing Address 183 3RD AVE APT 726

City

CHULA VISTA

State

CA

Zip Code

91910

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NONE

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 21 / 2016

Transaction ID : SA11AI.523189

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2075.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CLOUD, MARGIE, , ,

Mailing Address PO BOX 723

City
DURANTState
OKZip Code
74702FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CHOCTAW NATION OF OKLAHOMAOccupation (for Individual)
SENIOR CLERK

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 18 / 2016

Transaction ID : SA11AI.526807

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. COLE, FRANCIS H, , ,

Mailing Address 6195 BOSKEY DR

City
MILLINGTONState
TNZip Code
38053FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 23 / 2016

Transaction ID : SA11AI.523300

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CONANT, KIM U, , MS,

Mailing Address 14735 POWAY MESA DR

City
POWAYState
CAZip Code
92064FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2016

Transaction ID : SA11AI.527104

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

175.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CONTI, JESSE D, , MR,

Mailing Address PO BOX 2301

City
COLORADO SPRINGS

State
CO

Zip Code
80901

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 16 / 2016

Transaction ID : SA11AI.522759

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CORT, GEORGE, , MR.,

Mailing Address 16960 WILDWOOD DR

City
MONTROSE

State
CO

Zip Code
81403

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2016

Transaction ID : SA11AI.522501

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CRABTREE, THOMAS, , ,

Mailing Address 7859 TWIN RIDGE DRIVE

City
GLEN BURNIE

State
MD

Zip Code
21061

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2016

Transaction ID : SA11AI.526025

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

550.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 OF 187

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CRAMER, MICHAEL, , ,

Mailing Address 6041 AMBERDALE DR

City
YORBA LINDA

State
CA

Zip Code
92886

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
WINDSOR FOODS

Occupation (for Individual)
SR. QA DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

351.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 16 / 2016

Transaction ID : SA11AI.522763

Amount of Each Receipt this Period

36.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CUYLER, BEVERLY J, , MS,

Mailing Address 135 COUNTRY CENTER DR. STE. F #264

City
PAGOSA SPRINGS

State
CO

Zip Code
81147

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 12 / 2016

Transaction ID : SA11AI.526329

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DALTON, KENNETH, , ,

Mailing Address 332 S. HUNTINGTON AVE.

City
SAN DIMAS

State
CA

Zip Code
91773

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
QTI

Occupation (for Individual)
MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 14 / 2016

Transaction ID : SA11AI.526501

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

236.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 OF 187

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DALTON, KENNETH, , ,

Mailing Address 332 S. HUNTINGTON AVE.

City
SAN DIMAS

State
CA

Zip Code
91773

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
QTI

Occupation (for Individual)
MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 16 / 2016

Transaction ID : SA11AI.526669

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DAMON, CAROLYN J, , ,

Mailing Address PO BOX 791719

City
PAIA

State
HI

Zip Code
96779

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2016

Transaction ID : SA11AI.521757

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DANDREA, KATHY, , ,

Mailing Address 2651 PINE HAWK WAY

City
SAN MIGUEL

State
CA

Zip Code
93451

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2016

Transaction ID : SA11AI.526119

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

300.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DAROLD, ALFRED, , ,

Mailing Address 25144 SUTTON CT.

City
NOVI

State
MI

Zip Code
48374

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2016

Transaction ID : SA11AI.526901

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DEASY, MICHAEL, , ,

Mailing Address 13316 S. SHAWDEE RD. SE

City

HUNTSVILLE

State

AL

Zip Code

35803

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2016

Transaction ID : SA11AI.525900

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DEASY, MICHAEL, , ,

Mailing Address 13316 S. SHAWDEE RD. SE

City

HUNTSVILLE

State

AL

Zip Code

35803

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 15 / 2016

Transaction ID : SA11AI.526542

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

700.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DEIMLING, SADDINA, , ,

Mailing Address 4N517 MEDINAH ROAD

City
ADDISONState
ILZip Code
60101FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
POWERVAC SWEEPINGOccupation (for Individual)
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 30 / 2016

Transaction ID : SA11AI.527105

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DENDIU, SUE, H., MRS.,

Mailing Address 609 JULIA ST. UNIT 3

City
URBANAState
OHZip Code
43078FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 14 / 2016

Transaction ID : SA11AI.522508

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DEPUE, PAUL J., , ,

Mailing Address 6764 E. HOMER BALTIMORE RD.

City
HOMERState
NYZip Code
13077FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 06 / 2016

Transaction ID : SA11AI.521940

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

145.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DISSMANN-BECK, ERIKA, , ,

Mailing Address PO BOX 167

City
AMSTERDAMState
NYZip Code
12010FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 09 / 16 / 2016

Transaction ID : SA11AI.522771

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DOCTER, TIMOTHY, , ,

Mailing Address 7778 BOCA RATON DRIVE

City
LAS VEGASState
NVZip Code
89113FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

875.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 09 / 14 / 2016

Transaction ID : SA11AI.526484

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DOHERTY, EDWARD, , ,

Mailing Address 3704 CRAGMONT AVE

City
DALLASState
TXZip Code
75205FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 09 / 17 / 2016

Transaction ID : SA11AI.526748

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

1700.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DUDASH, BARBARA L, , ,

Mailing Address 937 AUGUSTA POINTE DR

City
PALM BEACH GARDENS

State
FL

Zip Code
33418

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 16 / 2016

Transaction ID : SA11AI.522776

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DUFFY, SEAN, , ,

Mailing Address 74 TENNIS PLAZA ROAD UNIT 22

City
DRACUT

State
MA

Zip Code
01826

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 23 / 2016

Transaction ID : SA11AI.521591

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. EARHART, ALAN LEE, , ,

Mailing Address 1370 PRITCHETT CT

City
LOS ALTOS

State
CA

Zip Code
94024

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2016

Transaction ID : SA11AI.525996

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. EKHOLM, JANICE, , ,

Mailing Address 7014 FOREST GRV

City
SAN ANTONIO

State
TX

Zip Code
78240

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : SA11AI.523030

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ELDER, ROLAND, D., MR.,

Mailing Address 3763 COUNTY ROAD 490

City
NORMANGEE

State
TX

Zip Code
77871

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : SA11AI.523031

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ELLISOR, WILBURN, L., MR.,

Mailing Address 5012 LAKESHORE DR.

City
KILLEEN

State
TX

Zip Code
76543

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 30 / 2016

Transaction ID : SA11AI.523693

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

260.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. EMERSON, RALPH, E, MR,

Mailing Address 5553 CONSERVATORY AVE

City
VIRGINIA BEACHState
VAZip Code
23455FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016

Transaction ID : SA11AI.521547

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ERNST, BARBARA, , ,

Mailing Address PO BOX 172771

City
ARLINGTONState
TXZip Code
76003FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016

Transaction ID : SA11AI.526915

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FARBER, BRUCE, , ,

Mailing Address PO BOX 685

City
OAK VIEWState
CAZip Code
93022FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 09 / 05 / 2016

Transaction ID : SA11AI.525941

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

300.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FELTON, RICHARD L, , ,

Mailing Address 107 HILLS CREEK DR

City

WELLSBORO

State

PA

Zip Code

16901

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED

Occupation (for Individual)

INFORMATION REQUESTED

Receipt For:

☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 09 / 16 / 2016

Transaction ID : SA11AI.522782

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FIKE, GARY, , ,

Mailing Address 1034 WOODSHIRE LA

City

STREET

State

MD

Zip Code

21154

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SELF EMPLOYED

Occupation (for Individual)

INSURANCE

Receipt For:

☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 09 / 08 / 2016

Transaction ID : SA11AI.526136

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FINLAY, KAY P, , ,

Mailing Address 10 LA CERRA CIR

City

RANCHO MIRAGE

State

CA

Zip Code

92270

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NONE

Occupation (for Individual)

RETIRED

Receipt For:

☐
☐

Primary

General

Other (specify)

Aggregate Year-to-Date ▼

1275.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 09 / 16 / 2016

Transaction ID : SA11AI.522783

Amount of Each Receipt this Period

75.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

175.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FITZWILLIAM, DAVID, , ,

Mailing Address 4100 CATHEDRAL AVE

City
WASHINGTON

State
DC

Zip Code
20016

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 01 / 2016

Transaction ID : SA11AI.525857

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FITZWILLIAM, DAVID, , ,

Mailing Address 4100 CATHEDRAL AVE

City
WASHINGTON

State
DC

Zip Code
20016

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2016

Transaction ID : SA11AI.526005

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FLYNN, JANE G, , ,

Mailing Address 1840 TICE CREEK DR APT 2105

City
WALNUT CREEK

State
CA

Zip Code
94595

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2016

Transaction ID : SA11AI.523705

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

135.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FOKAKIS, ARTHUR, N., ,

Mailing Address 120 WILDWOOD TRACE

City

HATTIESBURG

State

MS

Zip Code

39402

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED

Occupation (for Individual)

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 09 / 16 / 2016

Transaction ID : SA11AI.522788

Amount of Each Receipt this Period

90.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FOLEY, CHARLES, F., MR.,

Mailing Address 4246 HERMITAGE CT.

City

ALLISON PARK

State

PA

Zip Code

15101

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED

Occupation (for Individual)

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016

Transaction ID : SA11AI.523706

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FRAZIER, LARRILEE, , ,

Mailing Address 161 BROKENWOOD LN

City

CROSSVILLE

State

TN

Zip Code

38558

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

HILLTOPPERS INC.

Occupation (for Individual)

JR. COORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 09 / 16 / 2016

Transaction ID : SA11AI.522790

Amount of Each Receipt this Period

200.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

540.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FREITAS, VEDANA, , ,

Mailing Address 1157 RIDGEMARK DR

City
HOLLISTER

State
CA

Zip Code
95023

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYED

Occupation (for Individual)
REALTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

09 / 07 / 2016

Transaction ID : SA11AI.526089

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FRISTOE, WILLIAM, , ,

Mailing Address 300 NE 4TH TERRACE

City
OAK GROVE

State
MO

Zip Code
64075

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 29 / 2016

Transaction ID : SA11AI.527099

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GALKIN, WARREN, , ,

Mailing Address 29 SAGE DR

City
WARWICK

State
RI

Zip Code
02886

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HATCO PRODUCTS CORP.

Occupation (for Individual)
VICE CHAIRMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

35000.00

Date of Receipt

09 / 15 / 2016

Transaction ID : SA11AI.521050

Amount of Each Receipt this Period

5000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

5050.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 41 OF 187

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GARDNER, MILO, S, ,

Mailing Address 4901 CRENSHAW DR

City
EL PASO

State
TX

Zip Code
79924

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2016

Transaction ID : SA11AI.526456

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GARDNER, BETTY, , MRS,

Mailing Address 1572 GOODIN HOLLOW RD

City
NOEL

State
MO

Zip Code
64854

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1525.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 16 / 2016

Transaction ID : SA11AI.522795

Amount of Each Receipt this Period

450.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GARDNER, MILO, S, ,

Mailing Address 4901 CRENSHAW DR

City
EL PASO

State
TX

Zip Code
79924

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 23 / 2016

Transaction ID : SA11AI.527011

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

485.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 OF 187

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GARRETT, BUFORD, C., ,

Mailing Address 412 BROOK GLENN RD

City
TAYLORSState
SCZip Code
29687FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2016

Transaction ID : SA11AI.523712

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GARTHWAIT, ROBERT, W., ,

Mailing Address PO BOX 1367

City
WATERBURYState
CTZip Code
06721FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CLYDEL MFG COOccupation (for Individual)
CHAIRMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 15 / 2016

Transaction ID : SA11AI.521055

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GAUSEWITZ, CARL G., , ,

Mailing Address 2483 WESTBROOK ST SE

City
MAGNOLIAState
OHZip Code
44643FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2016

Transaction ID : SA11AI.522535

Amount of Each Receipt this Period

150.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

2850.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 43 OF 187

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GAUSEWITZ, CARL G, , ,

Mailing Address 2483 WESTBROOK ST SE

City
MAGNOLIAState
OHZip Code
44643FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016

Transaction ID : SA11AI.523713

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GAVALI, DELSIE, , ,

Mailing Address 970 MELUGINS GROVE RD.

City
COMPTONState
ILZip Code
61318FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 09 / 16 / 2016

Transaction ID : SA11AI.522797

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GEARY, STEPHEN W, , ,

Mailing Address 123 9TH AVE

City
HADDON HEIGHTSState
NJZip Code
08035FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 09 / 10 / 2016

Transaction ID : SA11AI.526277

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

800.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 44 OF 187

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GERHAB, BRYAN, , ,

Mailing Address 2303 KEMMERER ST

City
BETHLEHEM

State
PA

Zip Code
18017

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 25 / 2016

Transaction ID : SA11AI.527040

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GERHAB, BRYAN, , ,

Mailing Address 2303 KEMMERER ST

City
BETHLEHEM

State
PA

Zip Code
18017

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 26 / 2016

Transaction ID : SA11AI.523487

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GETTY, JAMES, , MR,

Mailing Address 2647 N 73RD PL

City
SCOTTSDALE

State
AZ

Zip Code
85257

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 26 / 2016

Transaction ID : SA11AI.523435

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

85.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GLASSER, LEWIS, , ,

Mailing Address 6621 E VIA CAVALIER

City
TUCSON

State
AZ

Zip Code
85715

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : SA11AI.523041

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GLOVER, RUTH, , ,

Mailing Address 671 GILBERT PL

City
CHULA VISTA

State
CA

Zip Code
91910

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : SA11AI.523042

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GLOVER, RUTH, , ,

Mailing Address 671 GILBERT PL

City
CHULA VISTA

State
CA

Zip Code
91910

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2016

Transaction ID : SA11AI.523715

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GODDARD, BRIAN, , ,

Mailing Address PO BOX 11459

City
CASA GRANDEState
AZZip Code
85130FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STUDENTOccupation (for Individual)
CENTRAL AZ COLLEGE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 09 / 10 / 2016

Transaction ID : SA11AI.526289

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GODFREY, WENDELL D, , ,

Mailing Address 501 FAWN CV

City
CANTONState
MSZip Code
39046FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 09 / 16 / 2016

Transaction ID : SA11AI.522800

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GOODWIN, ALAN, , ,

Mailing Address 5923 SPRING CREEK OAKS

City
SPRINGState
TXZip Code
77379FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SWIFT ENERGYOccupation (for Individual)
ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 09 / 07 / 2016

Transaction ID : SA11AI.526081

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

175.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GOOS, JEAN, , ,

Mailing Address 7840 W. PAINE AVE.

City
LAKEWOODState
COZip Code
80235FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 16 / 2016

Transaction ID : SA11AI.522802

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GRANGT, JOHN, , ,

Mailing Address 3413 HUNTER GLEN DR.

City
MANSFIELDState
TXZip Code
76063FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PDS TECHOccupation (for Individual)
ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 14 / 2016

Transaction ID : SA11AI.522539

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GROSS, HELEN, R., MS.,

Mailing Address 1307 S RIVERSIDE HARBOR DR.

City
POST FALLSState
IDZip Code
83854FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NOT EMPLOYEDOccupation (for Individual)
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 14 / 2016

Transaction ID : SA11AI.522543

Amount of Each Receipt this Period

300.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

450.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GROSSMAN, FELIX T, , MR,

Mailing Address 523 W 6TH ST STE 723

City
LOS ANGELES

State
CA

Zip Code
90014

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : SA11AI.523049

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GRUBB, SALLY, , ,

Mailing Address 18816 E 1050 NORTH RD

City
WESTVILLE

State
IL

Zip Code
61883

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 06 / 2016

Transaction ID : SA11AI.521968

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GRUBB, SALLY, , ,

Mailing Address 18816 E 1050 NORTH RD

City
WESTVILLE

State
IL

Zip Code
61883

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 16 / 2016

Transaction ID : SA11AI.522806

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

1200.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GUASTAVINO JR, RAFAEL, , ,

Mailing Address 23050 COL LEONARD RD

City
ROCK HALL

State
MD

Zip Code
21661

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ISLAND PT FARM

Occupation (for Individual)
FARM MGR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

09 / 17 / 2016

Transaction ID : SA11AI.526698

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GUTMANN, L, , MR,

Mailing Address 102 OAKDALE RD

City
BALTIMORE

State
MD

Zip Code
21210

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

09 / 19 / 2016

Transaction ID : SA11AI.523051

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HAAS, RICHARD A., , ,

Mailing Address 2181 NEW DANVILLE PIKE

City
LANCASTER

State
PA

Zip Code
17603

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

09 / 16 / 2016

Transaction ID : SA11AI.521141

Amount of Each Receipt this Period

3000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3220.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HAGEMAN, JOHN, , ,

Mailing Address 6075 PELICAN BAY BLVD.

City
NAPLESState
FLZip Code
34108FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2016

Transaction ID : SA11AI.526216

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HAILEY, MARJORIE H, , ,

Mailing Address 24 N NEOSHO ST APT 2G

City
COUNCIL GROVEState
KSZip Code
66846FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : SA11AI.523052

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HAMMOND, JAMES M, , ,

Mailing Address 622 CROOKED TREE DR

City
PETOSKEYState
MIZip Code
49770FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2016

Transaction ID : SA11AI.521774

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

300.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HAMMOND, JAMES M, , ,

Mailing Address 622 CROOKED TREE DR

City
PETOSKEY

State
MI

Zip Code
49770

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 21 / 2016

Transaction ID : SA11AI.523212

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HANSBOROUGH, HILBERT, , ,

Mailing Address 244 KEITH HAVEN LN

City
COLUMBUS

State
NC

Zip Code
28722

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2016

Transaction ID : SA11AI.526175

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HAPPEL, CRAIG, , ,

Mailing Address 220 N CLINTON AVE

City
ELMHURST

State
IL

Zip Code
60126

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYED

Occupation (for Individual)
COMPUTER CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 01 / 2016

Transaction ID : SA11AI.525858

Amount of Each Receipt this Period

35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

285.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HARLOW, JEAN S, , ,

Mailing Address 49 SLEEPY HOLLOW DR

City
ASHEVILLE

State
NC

Zip Code
28805

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 26 / 2016

Transaction ID : SA11AI.523493

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HARPER, RALPH, R., ,

Mailing Address 3 STEFENAGE CT.

City
PITTSFORD

State
NY

Zip Code
14534

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 23 / 2016

Transaction ID : SA11AI.523327

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HARTNER, GARY, , ,

Mailing Address 602 COLLEGE AVE

City
LUTHERVILLE TIMONIUM

State
MD

Zip Code
21093

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

335.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 08 / 2016

Transaction ID : SA11AI.526134

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

300.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HARTNER, GARY, , ,

Mailing Address 602 COLLEGE AVE

 City
 LUTHERVILLE TIMONIUM

 State
 MD

 Zip Code
 21093

 FEC ID number of contributing
 federal political committee.

C

 Name of Employer (for Individual)
 INFORMATION REQUESTED

 Occupation (for Individual)
 INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016

Transaction ID : SA11AI.526390

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HARTNER, GARY, , ,

Mailing Address 602 COLLEGE AVE

 City
 LUTHERVILLE TIMONIUM

 State
 MD

 Zip Code
 21093

 FEC ID number of contributing
 federal political committee.

C

 Name of Employer (for Individual)
 INFORMATION REQUESTED

 Occupation (for Individual)
 INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016

Transaction ID : SA11AI.526564

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HAVEKOTTE, EDYTHE M, , ,

Mailing Address 2300 INDIAN CREEK BLVD W APT C212

 City
 VERO BEACH

 State
 FL

 Zip Code
 32966

 FEC ID number of contributing
 federal political committee.

C

 Name of Employer (for Individual)
 NONE

 Occupation (for Individual)
 RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 09 / 16 / 2016

Transaction ID : SA11AI.522816

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

125.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HAYS, RANDALL, , ,

Mailing Address 306 TERRELL RD

City
SAN ANTONIOState
TXZip Code
78209FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HADEN HAYSOccupation (for Individual)
HOME STAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 09 / 07 / 2016

Transaction ID : SA11AI.525963

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HEMMETER, DAVID G, , ,

Mailing Address 257 DUDLEY OXFORD RD

City
DUDLEYState
MAZip Code
01571FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 09 / 16 / 2016

Transaction ID : SA11AI.522818

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HEUERMAN, CHARLES O, , ,

Mailing Address 14046 N 1600TH ST

City
TEUTOPOLISState
ILZip Code
62467FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2016

Transaction ID : SA11AI.523061

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

775.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HILL, RUSSELL, , ,

Mailing Address 31207 ALICE LANE

City
TOMBALLState
TXZip Code
77375FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 09 / 23 / 2016

Transaction ID : SA11AI.526994

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HOFFMAN, JOANNE, , ,

Mailing Address 3831 BLUFF ST.

City
TORRANCEState
CAZip Code
90505FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 09 / 06 / 2016

Transaction ID : SA11AI.521985

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HOJELL, MARY J, , ,

Mailing Address 215 KINNELON RD

City
KINNELONState
NJZip Code
07405FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NOT EMPLOYEDOccupation (for Individual)
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 09 / 16 / 2016

Transaction ID : SA11AI.522825

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

400.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HOLLAND, MARK, , ,

Mailing Address 1954 MIDDLETOWN AVENUE

City
NORTHFORD

State
CT

Zip Code
06472

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 10 / 2016

Transaction ID : SA11AI.526291

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HOLMAN, ELAINE K, , ,

Mailing Address 701 STEMMERS RUN RD

City
ESSEX

State
MD

Zip Code
21221

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2016

Transaction ID : SA11AI.523730

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HOLMES, ALAN L, , ,

Mailing Address 14910 E 48TH ST

City
KANSAS CITY

State
MO

Zip Code
64136

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 21 / 2016

Transaction ID : SA11AI.523220

Amount of Each Receipt this Period

70.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

295.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HOLT, NANCY, BONHAM, MRS,

Mailing Address 1056 BONHAM RANCH RD

City
WEIMARState
TXZip Code
78962FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYEDOccupation (for Individual)
RANCHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 30 / 2016

Transaction ID : SA11AI.523732

Amount of Each Receipt this Period

350.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HOVEY, MARY, L, MRS,

Mailing Address 6031 KIES WAY

City

SACRAMENTO

State

CA

Zip Code

95842

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 06 / 2016

Transaction ID : SA11AI.521987

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HOWELL, WILLIAM C., , ,

Mailing Address 620 BUERMANN AVE.

City

TOMS RIVER

State

NJ

Zip Code

08753

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 06 / 2016

Transaction ID : SA11AI.521989

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

470.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HOWELL, WILLIAM C., , ,

Mailing Address 620 BUERMANN AVE.

City
TOMS RIVERState
NJZip Code
08753FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 26 / 2016

Transaction ID : SA11AI.523506

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HOWES, ABIGAIL, , ,

Mailing Address 1720 BROOKSHIRE DRIVE

City
WALLA WALLAState
WAZip Code
99362FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 18 / 2016

Transaction ID : SA11AI.526809

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HUANG, J, ANDREW, MR,

Mailing Address 2212 ROSA VISTA TER

City
CAMARILLOState
CAZip Code
93012FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 16 / 2016

Transaction ID : SA11AI.526632

Amount of Each Receipt this Period

200.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

370.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HUNTER, GERALDINE, , MISS,

Mailing Address 15135 W JOMAX RD

City
SURPRISE

State
AZ

Zip Code
85387

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2016

Transaction ID : SA11AI.523736

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JARMAN, GERALD, , ,

Mailing Address 8321 N. PACKWOOD AVE.

City
TAMPA

State
FL

Zip Code
33604

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CSM OF FLORIDA

Occupation (for Individual)
REPAIR TECHNICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : SA11AI.526833

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JOHNSON, WAYNE, , ,

Mailing Address PO BOX 87

City
FABENS

State
TX

Zip Code
79838

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 16 / 2016

Transaction ID : SA11AI.522834

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

325.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. JOHNSON, JIM, , ,

Mailing Address PO BOX 1144

City
TROYState
MTZip Code
59935FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CHLOR RIDOccupation (for Individual)
MARKETING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 16 / 2016

Transaction ID : SA11AI.526624

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JONES, RICHARD, E, MR.,

Mailing Address 270 CAROLWOOD RD.

City

SAINT MARYS

State

PA

Zip Code

15857

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 21 / 2016

Transaction ID : SA11AI.523223

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JONSON, EDWARD, , ,

Mailing Address 16 HAWKVIEW ROAD

City

HUDSON

State

NH

Zip Code

03051

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 10 / 2016

Transaction ID : SA11AI.526262

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

1200.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KALTENBAUGH, MILES, , ,

Mailing Address 10003 OAK HOLLOW DR.

City
AUSTIN

State
TX

Zip Code
78758

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2016

Transaction ID : SA11AI.521793

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KAUB, PAUL W, , ,

Mailing Address 129 BUENA VISTA CT

City

ISLAMORADA

State

FL

Zip Code

33036

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2016

Transaction ID : SA11AI.522567

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KERBER, JOHN, , ,

Mailing Address 6900 NORTHGLENN WAY

City

JOHNSTON

State

IA

Zip Code

50131

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 23 / 2016

Transaction ID : SA11AI.526979

Amount of Each Receipt this Period

200.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

270.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KIGHT, DOUG, , ,

Mailing Address 3112 SUMMIT CT

City
LITTLE ROCKState
ARZip Code
72227FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 09 / 26 / 2016

Transaction ID : SA11AI.523515

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KINZER, JOHN D., , ,

Mailing Address 11413 NASSAU DR. NE

City
ALBUQUERQUEState
NMZip Code
87111FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RIO GRANDE ENV. STUDIES LLCOccupation (for Individual)
TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 09 / 06 / 2016

Transaction ID : SA11AI.522002

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KINZER, JOHN D., , ,

Mailing Address 11413 NASSAU DR. NE

City
ALBUQUERQUEState
NMZip Code
87111FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RIO GRANDE ENV. STUDIES LLCOccupation (for Individual)
TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

385.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 09 / 16 / 2016

Transaction ID : SA11AI.522844

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

195.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KIRBY, GENE L, , ,

Mailing Address PO BOX 4026

City
ODESSAState
TXZip Code
79760FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BULLDOG SPECOccupation (for Individual)
CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2016

Transaction ID : SA11AI.522573

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KIRSCH, GEORGE, C., MR, JR.

Mailing Address 21711 SLIPPERY CREEK LN

City
SPRINGState
TXZip Code
77388FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
TAS COMMERCIAL CONCRETEOccupation (for Individual)
TRANSPORTATION MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 06 / 2016

Transaction ID : SA11AI.522003

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KISER, ROBERT M, , ,

Mailing Address 6548 43RD ST APT 1308

City
LUBBOCKState
TXZip Code
79407FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : SA11AI.523075

Amount of Each Receipt this Period

200.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

400.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KLEIN, CAROLYN, , MS.,

Mailing Address 3510 SEWELL ST

City
LINCOLNState
NEZip Code
68506FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 09 / 16 / 2016

Transaction ID : SA11AI.522848

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KLINGLER, GARY, , ,

Mailing Address 3902 W VALLEY DR

City
MISSOURI CITYState
TXZip Code
77459FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
JACOBSOccupation (for Individual)
CONSTRUCTION MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016

Transaction ID : SA11AI.526428

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KOMATSU, GENE K, , ,

Mailing Address 1804 HARKNESS ST

City
MANHATTAN BEACHState
CAZip Code
90266FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYEDOccupation (for Individual)
GENERAL CONTRACTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2016

Transaction ID : SA11AI.523076

Amount of Each Receipt this Period

200.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KREMS, PHILLIP, , ,

Mailing Address 3235 ROCKY RIVER DR.2

City
CLEVELAND

State
OH

Zip Code
44111

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 15 / 2016

Transaction ID : SA11AI.521058

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KUMBERA, DAVID, , ,

Mailing Address 20345 THUNDER ROAD EAST

City
COLORADO SPRINGS

State
CO

Zip Code
80908

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYED

Occupation (for Individual)
TRUCKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2016

Transaction ID : SA11AI.526091

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LABARRE, CHERYL, , ,

Mailing Address 30512 PASEO DEL VALLE

City
LAGUNA NIGUEL

State
CA

Zip Code
92677

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYED

Occupation (for Individual)
MARRIAGE/RELATIONSHIP COACH

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 05 / 2016

Transaction ID : SA11AI.525940

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

180.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LANGERAK, MICHAEL, , MS.,

Mailing Address 6612 BARRY ST.

City
HUDSONVILLE

State
MI

Zip Code
49426

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 16 / 2016

Transaction ID : SA11AI.522853

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LANGO, RICHARD, , ,

Mailing Address P.O. BOX 235

City
BISHOP

State
CA

Zip Code
93515

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
UNITED PARCEL SERVICE

Occupation (for Individual)
TRUCK DRIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 18 / 2016

Transaction ID : SA11AI.526806

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LARSON, JANENE M, , ,

Mailing Address 391 LINARES AVE

City
LONG BEACH

State
CA

Zip Code
90803

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 12 / 2016

Transaction ID : SA11AI.522366

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

375.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LAVOR, IRENE, , ,

Mailing Address 3650 N. CAMINO OJO DE AGUA

City
TUCSONState
AZZip Code
85749FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : SA11AI.523085

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LAWRENCE, JAMES, , ,

Mailing Address 330 10TH AVE W.

City
HUNTINGTONState
WVZip Code
25701FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 18 / 2016

Transaction ID : SA11AI.526803

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LEAHY, ROBERT, , ,

Mailing Address 622 JASMINE LA

City
SUNSET BEACHState
NCZip Code
28468FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 16 / 2016

Transaction ID : SA11AI.526681

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

175.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LEVIN, HERBERT ALAN, , ,

Mailing Address 724 E GRINNELL DR

City
BURBANKState
CAZip Code
91501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DEPT OF JUSTICE OF THE STATE OF CAOccupation (for Individual)
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1145.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 09 / 02 / 2016

Transaction ID : SA11AI.521809

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LEVIN, HERBERT ALAN, , ,

Mailing Address 724 E GRINNELL DR

City
BURBANKState
CAZip Code
91501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DEPT OF JUSTICE OF THE STATE OF CAOccupation (for Individual)
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1245.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 09 / 16 / 2016

Transaction ID : SA11AI.522859

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LEVINE, BERT S, , ,

Mailing Address 6155 DEL PASO AVE

City
SAN DIEGOState
CAZip Code
92120FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 09 / 02 / 2016

Transaction ID : SA11AI.525870

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 69 OF 187

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LEWIS, VERNON F, , ,

Mailing Address 204 E SANTA CRUZ DR

City
GOODYEAR

State
AZ

Zip Code
85338

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2016

Transaction ID : SA11AI.521612

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LILES, PAUL, , ,

Mailing Address 974 TAM O SHANTER

City
LAS VEGAS

State
NV

Zip Code
89109

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 23 / 2016

Transaction ID : SA11AI.527008

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LIND, ALEXANDER D, , MR, JR

Mailing Address 217 SHADY CREST LN

City
PINEVILLE

State
LA

Zip Code
71360

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2016

Transaction ID : SA11AI.522222

Amount of Each Receipt this Period

75.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

150.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
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 Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LOMBARDI, CHRISTOPHER, , ,

Mailing Address 4401 PASEO DE LAS TORTUGAS

City
TORRANCEState
CAZip Code
90505FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYEDOccupation (for Individual)
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 09 / 02 / 2016

Transaction ID : SA11AI.521731

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LONG, WILLIAM, , ,

Mailing Address 875 HAWTHORN AVE.

City
MECHANICSBURGState
PAZip Code
17055FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 09 / 07 / 2016

Transaction ID : SA11AI.525978

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LOVEJOY, JOHN, , ,

Mailing Address 85799 BAKERS RIDGE RD

City
JEWETTState
OHZip Code
43986FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYEDOccupation (for Individual)
FARMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 09 / 10 / 2016

Transaction ID : SA11AI.526292

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

225.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LYLES, JIM, , ,

Mailing Address 8111 CYPRESSWOOD DR STE 108

City
SPRINGState
TXZip Code
77379FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
JAMES C LYLES DDS INC.Occupation (for Individual)
DENTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 06 / 2016

Transaction ID : SA11AI.525956

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MADERA, KATHERINE, R., MS.,

Mailing Address PO BOX 443

City
MANHATTANState
MTZip Code
59741FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 16 / 2016

Transaction ID : SA11AI.522867

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MAICKI, HENRY, , ,

Mailing Address 2611 VANEL CT

City
WEST BLOOMFIELDState
MIZip Code
48324FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 16 / 2016

Transaction ID : SA11AI.522868

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

375.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MAKULA, JOSEPH, , ,

Mailing Address 7201 W KEENEY ST

City
NILESState
ILZip Code
60714FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 09 / 14 / 2016

Transaction ID : SA11AI.522590

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MARSLENDER, W., W., MR.,

Mailing Address 3608 RANLO DR.

City
RALEIGHState
NCZip Code
27612FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 09 / 16 / 2016

Transaction ID : SA11AI.522869

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MARSLENDER, W., W., MR.,

Mailing Address 3608 RANLO DR.

City
RALEIGHState
NCZip Code
27612FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2016

Transaction ID : SA11AI.523761

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

200.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MARSTELLER, ROBERT, , ,

Mailing Address 1706 WALKER RD

City
FREELANDState
MDZip Code
21053FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016

Transaction ID : SA11AI.523762

Amount of Each Receipt this Period

105.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MARX, RICHARD C, , ,

Mailing Address PO BOX 440

City
WAPPINGERS FALLSState
NYZip Code
12590FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1020.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016

Transaction ID : SA11AI.523358

Amount of Each Receipt this Period

255.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MATHEWS, MARY I, , ,

Mailing Address 4876 PATRICK RD

City
WINNSBOROState
SCZip Code
29180FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2600.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 09 / 01 / 2016

Transaction ID : SA11AI.525831

Amount of Each Receipt this Period

300.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

660.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MATHEWS, MARY I, , ,

Mailing Address 4876 PATRICK RD

City
WINNSBOROState
SCZip Code
29180FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2850.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 09 / 03 / 2016

Transaction ID : SA11AI.525910

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MATHEWS, MARY I, , ,

Mailing Address 4876 PATRICK RD

City
WINNSBOROState
SCZip Code
29180FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3100.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 09 / 07 / 2016

Transaction ID : SA11AI.525985

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MAY, CARL, , ,

Mailing Address 2245 MONICA STREET

City
BEAUMONTState
TXZip Code
77707FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
JEFFERSON COUNTY SHERIFF DEPTOccupation (for Individual)
LAW ENFORCEMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016

Transaction ID : SA11AI.526613

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

525.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MAYOL, MARIA E, , ,

Mailing Address 1819 W THOME AVE APT N405

City
CHICAGO

State
IL

Zip Code
60660

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

MM / DD / YYYY
09 / 23 / 2016

Transaction ID : SA11AI.521490

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MAYS, THOMAS, , ,

Mailing Address 11343 W. MONTICELLO PL.

City
WESTCHESTER

State
IL

Zip Code
60154

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY
09 / 07 / 2016

Transaction ID : SA11AI.526018

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MAYS, THOMAS, , ,

Mailing Address 11343 W. MONTICELLO PL.

City
WESTCHESTER

State
IL

Zip Code
60154

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
09 / 16 / 2016

Transaction ID : SA11AI.522871

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

235.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MAYS, THOMAS, , ,

Mailing Address 11343 W. MONTICELLO PL.

City
WESTCHESTER

State
IL

Zip Code
60154

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2016

Transaction ID : SA11AI.526899

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MC NEILL, ERNEST, , ,

Mailing Address 23 CHESTNUT CIRCLE

City
JASPER

State
TX

Zip Code
75951

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2016

Transaction ID : SA11AI.526519

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCBRYDE, RONNIE, , ,

Mailing Address 3600 CONNELL ST

City
LAS VEGAS

State
NV

Zip Code
89129

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RIMBUS CONSULTING GROUP

Occupation (for Individual)
CIVIL ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 06 / 2016

Transaction ID : SA11AI.522035

Amount of Each Receipt this Period

40.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

165.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MCCABE, MICHAEL, , ,

Mailing Address 200 W CENTRAL AVE

City
SANTA ANAState
CAZip Code
92707FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CALIFORNIA LANDCAREOccupation (for Individual)
MANAGEMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 18 / 2016

Transaction ID : SA11AI.526777

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCCALL, CATHERINE, , ,

Mailing Address 4495 DEANS HIGHWAY

City
VERNONState
NYZip Code
13476FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 23 / 2016

Transaction ID : SA11AI.526987

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCCALLON, VIRGINIA, , ,

Mailing Address 11412 NE 86TH ST

City
KIRKLANDState
WAZip Code
98033FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PRIVATE FAMILYOccupation (for Individual)
NANNY

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 15 / 2016

Transaction ID : SA11AI.526615

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

620.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MCCARTHY, JOHN, , ,

Mailing Address 2400 BASTILLE CT

City
MCKINNEY

State
TX

Zip Code
75070

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 18 / 2016

Transaction ID : SA11AI.526808

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCCURDY, ROBERT C., , ,

Mailing Address 1613 NE 6TH TER

City
CAPE CORAL

State
FL

Zip Code
33909

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LEE MEMORIAL HOSPITAL

Occupation (for Individual)
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 30 / 2016

Transaction ID : SA11AI.523766

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCDONALD, ROBERT L., , ,

Mailing Address 2018 HIDDEN CREST DR

City
EL CAJON

State
CA

Zip Code
92019

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 26 / 2016

Transaction ID : SA11AI.523530

Amount of Each Receipt this Period

300.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

425.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 79 OF 187

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MCGONEGLE, DAVID E., , ,

Mailing Address 4709 ALADDIN LN

City
LAS VEGAS

State
NV

Zip Code
89102

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2016

Transaction ID : SA11AI.522600

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCKARUS, ROGER E., , ,

Mailing Address 12348 213TH ST.

City
HAWAIIAN GDNS

State
CA

Zip Code
90716

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 16 / 2016

Transaction ID : SA11AI.522876

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCKAY, WILLIAM, , ,

Mailing Address 18511 SHILOH FRST

City
SAN ANTONIO

State
TX

Zip Code
78258

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : SA11AI.523097

Amount of Each Receipt this Period

105.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

175.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 80 OF 187

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MCMULLEN-VALLERGA, EILEEN, , ,

Mailing Address PO BOX 1792

City
MIDDLETOWN

State
CA

Zip Code
95461

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 04 / 2016

Transaction ID : SA11AI.525925

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCWILLIAMS, CHARLES A., , ,

Mailing Address 9015 ADMIRAL VERNON TER.

City
ALEXANDRIA

State
VA

Zip Code
22309

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 16 / 2016

Transaction ID : SA11AI.522879

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MERRELL, LYLE, , ,

Mailing Address 3086 HERMOSA DRIVE

City
NAPA

State
CA

Zip Code
94558

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 08 / 2016

Transaction ID : SA11AI.526118

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

175.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)**ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MILLER, PAUL G, , ,

Mailing Address PO BOX 60772

City
HARRISBURGState
PAZip Code
17106FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	12	/	2016

Transaction ID : SA11AI.522381

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MILLER, MAXIE, , ,

Mailing Address 635 MILLER CIR

City
PELHAMState
ALZip Code
35124FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	16	/	2016

Transaction ID : SA11AI.526636

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MINNELLA, LEWIS, , ,

Mailing Address 717 HOLLYBROOK LN

City
MANCHESTER TWState
NJZip Code
08759FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	12	/	2016

Transaction ID : SA11AI.522383

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

350.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 82 OF 187

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MIZELL, WALKER, , ,

Mailing Address 45120 DORMAN PLACE

City
CALLAHANState
FLZip Code
32011FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 23 / 2016

Transaction ID : SA11AI.526975

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MOON, ARTHUR, , ,

Mailing Address 23213 DOBLE AVE

City
TORRANCEState
CAZip Code
90502FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BOEINGOccupation (for Individual)
AERO ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2016

Transaction ID : SA11AI.522613

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MORGAN, CRAIG M., , ,

Mailing Address 1611 13TH AVE.

City
HUNTINGTONState
WVZip Code
25701FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
EYE CONSULTANTS OF HUNTINGTONOccupation (for Individual)
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2016

Transaction ID : SA11AI.522235

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

500.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 83 OF 187

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MORMAN, WILLIAM B, , ,

Mailing Address 111 HILLENDALE AVE

City
NAZARETHState
PAZip Code
18064FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2016

Transaction ID : SA11AI.522388

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MORRIS, DEBORAH, , ,

Mailing Address 146 MCDOUGALL RD

City
ARGYLEState
NYZip Code
12809FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 09 / 14 / 2016

Transaction ID : SA11AI.522615

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MORRIS, DEBORAH, , ,

Mailing Address 146 MCDOUGALL RD

City
ARGYLEState
NYZip Code
12809FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 09 / 14 / 2016

Transaction ID : SA11AI.526503

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

380.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MORROW, MARISE, , ,

Mailing Address 1355 COPPER GLEN DR SE

City
SALEM

State
OR

Zip Code
97302

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2016

Transaction ID : SA11AI.525896

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MOYER, MARK W, , ,

Mailing Address 17387 PALMER RD

City

MOORES HILL

State

IN

Zip Code

47032

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYED

Occupation (for Individual)
SECURITY DOORS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : SA11AI.526834

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MULHALL, JOHN, , ,

Mailing Address 5222 25TH LN NW

City

OLYMPIA

State

WA

Zip Code

98502

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 01 / 2016

Transaction ID : SA11AI.525848

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

625.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MULHALL, JOHN, , ,

Mailing Address 5222 25TH LN NW

City
OLYMPIAState
WAZip Code
98502FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2016

Transaction ID : SA11AI.526499

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MURPHY, CLAIR J, , ,

Mailing Address 1626 RUTH ST N

City
SAINT PAULState
MNZip Code
55119FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 16 / 2016

Transaction ID : SA11AI.522888

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MURPHY, CLAIR J, , ,

Mailing Address 1626 RUTH ST N

City
SAINT PAULState
MNZip Code
55119FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2016

Transaction ID : SA11AI.523772

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

250.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MURRAY, WALTER W, , ,

Mailing Address 209 PALOMINO DR

City
OAKDALEState
PAZip Code
15071FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 12 / 2016

Transaction ID : SA11AI.522389

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MYLER, GENE, , ,

Mailing Address 152 ROAD 5018

City
BLOOMFIELDState
NMZip Code
87413FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : SA11AI.523106

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MYRAND, GERALD C., , ,

Mailing Address 15610 KEPPEM AVE

City
ALLEN PARKState
MIZip Code
48101FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RADAR INDUSTRIESOccupation (for Individual)
TOOL AND DIEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 26 / 2016

Transaction ID : SA11AI.523542

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

150.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. NELSON, RALPH, E, MR, JR

Mailing Address PO BOX 1287

City
LEBEC

State
CA

Zip Code
93243

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYED

Occupation (for Individual)
AUTO SERVICE & REPAIR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

660.00

Date of Receipt

09 / 09 / 2016

Transaction ID : SA11AI.522240

Amount of Each Receipt this Period

140.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NENZEL, RICHARD, , ,

Mailing Address 2614 LA GOLONDRINA ST

City
CARLSBAD

State
CA

Zip Code
92009

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

09 / 14 / 2016

Transaction ID : SA11AI.526513

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NICHOLAS, PHYLLIS W., , ,

Mailing Address 40 HOWARD RD

City
GREENWICH

State
CT

Zip Code
06831

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

09 / 14 / 2016

Transaction ID : SA11AI.526465

Amount of Each Receipt this Period

200.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

365.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. NICHOLSON, MICHAEL R, , ,

Mailing Address 3530 MOUND VIEW AVE

City

STUDIO CITY

State

CA

Zip Code

91604

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NONE

Occupation (for Individual)

RETIRED

Receipt For:

☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 09 / 16 / 2016

Transaction ID : SA11AI.522891

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NORLING, NEVA N, , ,

Mailing Address 7230 SANTA BARBARA ST

City

CARLSBAD

State

CA

Zip Code

92011

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)

INFORMATION REQUESTED

Receipt For:

☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016

Transaction ID : SA11AI.521521

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NORLING, NEVA N, , ,

Mailing Address 7230 SANTA BARBARA ST

City

CARLSBAD

State

CA

Zip Code

92011

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)

INFORMATION REQUESTED

Receipt For:

☐
☐

Primary

General

Other (specify)

Aggregate Year-to-Date ▼

325.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016

Transaction ID : SA11AI.523773

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

700.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. O'BRIEN, RICHARD E, , MR,

Mailing Address 133 WALNUT CIR

City
SUGAR GROVE

State
IL

Zip Code
60554

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 26 / 2016

Transaction ID : SA11AI.523547

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. OTTENBREIT, GERALD E, , ,

Mailing Address 15594 SUSAN ST

City
SOUTHGATE

State
MI

Zip Code
48195

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 23 / 2016

Transaction ID : SA11AI.523379

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. OVERTON, RITA, , ,

Mailing Address 12901 CATALINA ST

City
LEAWOOD

State
KS

Zip Code
66209

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 06 / 2016

Transaction ID : SA11AI.522058

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

625.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PAIZ, VERNON L, , ,

Mailing Address 4438 DECATUR ST

City
DENVERState
COZip Code
80211FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2016

Transaction ID : SA11AI.526854

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PALMER, ROBERT, , ,

Mailing Address 10500 ESPIRA CT NW

City
ALBUQUERQUEState
NMZip Code
87114FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LOCKHEED MARTINOccupation (for Individual)
CONTRACT INSTRUCTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 10 / 2016

Transaction ID : SA11AI.526257

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PATTERSON, GUY, , ,

Mailing Address 8585 MABEL DR

City
JACKSONVILLEState
FLZip Code
32256FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
COASTAL RESOURCES, INCOccupation (for Individual)
REAL ESTATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2016

Transaction ID : SA11AI.525959

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

635.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PATTERSON, GUY, , ,

Mailing Address 8585 MABEL DR

City
JACKSONVILLEState
FLZip Code
32256FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
COASTAL RESOURCES, INCOccupation (for Individual)
REAL ESTATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	15	/	2016

Transaction ID : SA11AI.526528

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Pattie, E., S., MS.,

Mailing Address 2404 RAYMOND PL.

City
HAYMARKETState
VAZip Code
20169FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	12	/	2016

Transaction ID : SA11AI.522401

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PERKINSON, RUSSELL, , ,

Mailing Address PO BOX 65

City
THAWVILLEState
ILZip Code
60968FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYEDOccupation (for Individual)
FARMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	16	/	2016

Transaction ID : SA11AI.522898

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

1140.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PERRY, MARYANN, R., MS.,

Mailing Address 114 BUSHNELL ST.

City
BUFFALO

State
NY

Zip Code
14206

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2016

Transaction ID : SA11AI.523781

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PETRONE, AUGUSTA C, , ,

Mailing Address PO BOX 1037

City
DUBLIN

State
NH

Zip Code
03444

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2016

Transaction ID : SA11AI.526904

Amount of Each Receipt this Period

257.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PITCAIRN, CLARK, , ,

Mailing Address PO BOX 305

City
BRYN ATHYN

State
PA

Zip Code
19009

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PITCAIRN TRUST

Occupation (for Individual)
FINANCIAL TRUSTEE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2016

Transaction ID : SA11AI.527111

Amount of Each Receipt this Period

30.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

787.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. POLLARD, RICHARD, R., MR.,

Mailing Address 1108 SLEEPY DELL CT.

City
TOWSON

State
MD

Zip Code
21286

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
POLLARD'S TOWING CO

Occupation (for Individual)
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2016

Transaction ID : SA11AI.523788

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PRAEGER, DOROTHY A, ,

Mailing Address 59 SAN BENITO WAY

City
SAN FRANCISCO

State
CA

Zip Code
94127

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2016

Transaction ID : SA11AI.521843

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PROBST, JAMES, , MR,

Mailing Address 3548 E 200 NORTH RD

City
SIGEL

State
IL

Zip Code
62462

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2016

Transaction ID : SA11AI.522644

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

500.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PUZDER, ANDY, , ,

Mailing Address 6303 CARPINTERIA AVE.

City
CARPINTERIAState
CAZip Code
93013FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CKE RESTAURANT HOLDINGSOccupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016

Transaction ID : SA11AI.521202

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RANSLEM, CLARENCE, , MR,

Mailing Address 30 W LAMBERT LN UNIT 222

City
TUCSONState
AZZip Code
85737FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 09 / 16 / 2016

Transaction ID : SA11AI.522912

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RAWLES, JAMES, WHITE, , JR.

Mailing Address 1205 N. BAYSHORE DRIVE

City
VIRGINIA BEACHState
VAZip Code
23451FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016

Transaction ID : SA11AI.521188

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

6035.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. REAVIS, PHILIP, , ,

Mailing Address 624 N FARRELL DRIVE

City
PALM SPRINGS

State
CA

Zip Code
92262

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1410.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 07 / 2016

Transaction ID : SA11AI.526090

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. REINHARD, DONALD, , ,

Mailing Address 75 HARVARD AVE

City
PALMERTON

State
PA

Zip Code
18071

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PENCOR SERVICES INC

Occupation (for Individual)
EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 02 / 2016

Transaction ID : SA11AI.525887

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. REINHARD, DONALD, , ,

Mailing Address 75 HARVARD AVE

City
PALMERTON

State
PA

Zip Code
18071

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PENCOR SERVICES INC

Occupation (for Individual)
EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 16 / 2016

Transaction ID : SA11AI.526668

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2200.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. REUSCHLEIN, LINDA, C, ,

Mailing Address 888 WEIRES AVE

City
CUMBERLAND

State
MD

Zip Code
21502

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 09 / 2016

Transaction ID : SA11AI.522251

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. REYES, MARY, , ,

Mailing Address 9520 FOXBURY WAY

City
PICO RIVERA

State
CA

Zip Code
90660

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 16 / 2016

Transaction ID : SA11AI.522915

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RICHEY, MARGARET J, , ,

Mailing Address 155 SUMMIT DR

City
FRANKLIN

State
PA

Zip Code
16323

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 12 / 2016

Transaction ID : SA11AI.526323

Amount of Each Receipt this Period

400.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

600.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. RIGGS, CHARLES, A, MR,

Mailing Address 15 THOMAS POINTE DR

City
FORT THOMAS

State
KY

Zip Code
41075

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 16 / 2016

Transaction ID : SA11AI.522917

Amount of Each Receipt this Period

1.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RILEY, PAMELA, SUE, MRS.,

Mailing Address 2404 WATERFRONT PARK DR.

City
CANYON LAKE

State
TX

Zip Code
78133

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 23 / 2016

Transaction ID : SA11AI.521527

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ROBERSON, CLIVE, , ,

Mailing Address 135 EL MIRASOL

City
PALM BEACH

State
FL

Zip Code
33480

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2016

Transaction ID : SA11AI.522254

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

601.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 98 OF 187

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ROLFE, KENNETH L., ,

Mailing Address 301 SE FOUNDATION DR

City
DALLASState
ORZip Code
97338FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2016

Transaction ID : SA11AI.521850

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ROSSI, LOUIS A., ,

Mailing Address 2255 SALISBURY WAY

City
SAN MATEOState
CAZip Code
94403FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2016

Transaction ID : SA11AI.523796

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RUST, ROBERT, W., ,

Mailing Address 1430 S DIXIE HWY STE 315

City
CORAL GABLESState
FLZip Code
33146FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 29 / 2016

Transaction ID : SA11AI.527092

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

1300.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SACKETT, EUNICE E, , ,

Mailing Address PO BOX 255

City
DODGE CENTER

State
MN

Zip Code
55927

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 23 / 2016

Transaction ID : SA11AI.523401

Amount of Each Receipt this Period

125.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SCHACK, DIANNE A, , ,

Mailing Address 19 REATA PL

City
OAKLAND

State
CA

Zip Code
94618

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : SA11AI.523136

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SCHIERL, PAUL, J, MR,

Mailing Address 1815 RAINBOW AVE

City
DE PERE

State
WI

Zip Code
54115

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 26 / 2016

Transaction ID : SA11AI.523433

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

405.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 100 OF 187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SCHULZE, MICHAEL, , ,

Mailing Address 284 LAKE WILLIAMS DRIVE

City
LEBANONState
CTZip Code
06249FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	07	/	2016

Transaction ID : SA11AI.526004

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SCHULZE, MICHAEL, , ,

Mailing Address 284 LAKE WILLIAMS DRIVE

City
LEBANONState
CTZip Code
06249FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	15	/	2016

Transaction ID : SA11AI.526552

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SCIOLA, CHARLOTTE, , ,

Mailing Address 14 KIMBALL AVE

City
WENHAMState
MAZip Code
01984FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	08	/	2016

Transaction ID : SA11AI.526103

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶

100.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SCIOLA, CHARLOTTE, , ,

Mailing Address 14 KIMBALL AVE

City
WENHAM

State
MA

Zip Code
01984

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

MM / DD / YYYY
09 / 14 / 2016

Transaction ID : SA11AI.526455

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SEAY, JOAN, , ,

Mailing Address 148 PEMBROKE LN

City
FALLING WTRS

State
WV

Zip Code
25419

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

MM / DD / YYYY
09 / 30 / 2016

Transaction ID : SA11AI.523799

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SEYDA, DAVID, , ,

Mailing Address 508 BARCELONA DR

City
TIERRA VERDE

State
FL

Zip Code
33715

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY
09 / 17 / 2016

Transaction ID : SA11AI.526723

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

185.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 102 OF 187

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SHARP, NORMA, , ,

Mailing Address 6701 SUNNYHILL RD

City
LOUISVILLE

State
KY

Zip Code
40228

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 16 / 2016

Transaction ID : SA11AI.522936

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SHERFY, BETH, , MS,

Mailing Address 1123 FOX RUN CIR

City
NEW BRAUNFELS

State
TX

Zip Code
78130

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 15 / 2016

Transaction ID : SA11AI.526584

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SHERRY, BETTY B., , ,

Mailing Address 1724 W CATALPA AVE. APT. 320

City
ANAHEIM

State
CA

Zip Code
92801

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

415.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 16 / 2016

Transaction ID : SA11AI.522937

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

300.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SHILLINGBURG, JOHN E, , ,

Mailing Address 4800 FILLMORE AVE APT 603

City
ALEXANDRIA

State
VA

Zip Code
22311

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 12 / 2016

Transaction ID : SA11AI.522422

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SHILLINGBURG, JOHN E, , ,

Mailing Address 4800 FILLMORE AVE APT 603

City
ALEXANDRIA

State
VA

Zip Code
22311

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2016

Transaction ID : SA11AI.523804

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SHOTTS, NORMAN, , ,

Mailing Address 7027 CORINTIA STREET

City
CARLSBAD

State
CA

Zip Code
92009

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
FARMDALE CREAMERY

Occupation (for Individual)
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 23 / 2016

Transaction ID : SA11AI.526957

Amount of Each Receipt this Period

200.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

325.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
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 (check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SIEVERS, JAMES L, , ,

Mailing Address 12 HORSESHOE TRL

City

NEW BRAUNFELS

State

TX

Zip Code

78132

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NONE

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		14		2016

Transaction ID : SA11AI.526491

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SIEVERS, JAMES L, , ,

Mailing Address 12 HORSESHOE TRL

City

NEW BRAUNFELS

State

TX

Zip Code

78132

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NONE

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2016

Transaction ID : SA11AI.526993

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SIMON, VICKI, L, MRS.,

Mailing Address 1910 DELLORE LN

City

LEAGUE CITY

State

TX

Zip Code

77573

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED

Occupation (for Individual)

INFORMATION REQUESTED

Receipt For:

☐ Primary
☐ Other (specify)

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2016

Transaction ID : SA11AI.521857

Amount of Each Receipt this Period

150.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

200.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SIMON, ALLEN, , ,

Mailing Address 1383 N CRISS ST

City
CHANDLER

State
AZ

Zip Code
85226

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2016

Transaction ID : SA11AI.526207

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SIMON, JEROME M, , ,

Mailing Address 1294 ROCK RIMMON RD

City
STAMFORD

State
CT

Zip Code
06903

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DCS

Occupation (for Individual)
DENTAL SURGEON

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 26 / 2016

Transaction ID : SA11AI.523566

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SIMONE, VALERIA, , ,

Mailing Address 235 PELHAMDALE AVE

City
PELHAM

State
NY

Zip Code
10803

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 16 / 2016

Transaction ID : SA11AI.526682

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SIMONE, VALERIA, , ,

Mailing Address 235 PELHAMDALE AVE

City
PELHAM

State
NY

Zip Code
10803

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 23 / 2016

Transaction ID : SA11AI.527009

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SIMS, LESTER, , ,

Mailing Address 214 EMERY ST

City
MULVANE

State
KS

Zip Code
67110

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYED

Occupation (for Individual)
FARMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 16 / 2016

Transaction ID : SA11AI.522939

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SLAVIK, JOHN, , ,

Mailing Address 510 E ALEXANDER PALM RD

City
BOCA RATON

State
FL

Zip Code
33432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PINNACLE HOLDINGS

Occupation (for Individual)
REAL ESTATE INVESTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 16 / 2016

Transaction ID : SA11AI.521137

Amount of Each Receipt this Period

2500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3050.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SMITH, EDWARD, , ,

Mailing Address 6109 STONEHAVEN DR

City
NASHVILLEState
TNZip Code
37215FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 09 / 07 / 2016

Transaction ID : SA11AI.526057

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SMITH, DOYLE, A, MR,

Mailing Address 9284 ASTER RD

City
GILMERState
TXZip Code
75644FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 09 / 09 / 2016

Transaction ID : SA11AI.526252

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SMITH, EDWARD, , ,

Mailing Address 6109 STONEHAVEN DR

City
NASHVILLEState
TNZip Code
37215FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 09 / 12 / 2016

Transaction ID : SA11AI.526338

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

320.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SMITH, BETTY M., , ,

Mailing Address 1101 SMITHLAND BND.

City
ANDERSON

State
SC

Zip Code
29621

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2016

Transaction ID : SA11AI.522669

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SMITH, EDWARD, , ,

Mailing Address 6109 STONEHAVEN DR

City
NASHVILLE

State
TN

Zip Code
37215

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 18 / 2016

Transaction ID : SA11AI.526802

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SMITH, MARGARET, , ,

Mailing Address 9732 LINDSEY BLAKE LN

City
GREAT FALLS

State
VA

Zip Code
22066

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NOT EMPLOYED

Occupation (for Individual)
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2016

Transaction ID : SA11AI.523807

Amount of Each Receipt this Period

200.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

400.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SNYDER, CANDICE D., , ,

Mailing Address 3800 CORUM CV

City
AUSTIN

State
TX

Zip Code
78746

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 15 / 2016

Transaction ID : SA11AI.521052

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SPENCER, BILL, , ,

Mailing Address 4197 PINE LAKE DR

City
FORT GRATIOT

State
MI

Zip Code
48059

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2016

Transaction ID : SA11AI.526138

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STAHMANN, KATHRYN, A, MS,

Mailing Address 42 N TANGLEWOOD SPUR

City
SEDONA

State
AZ

Zip Code
86351

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

454.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 23 / 2016

Transaction ID : SA11AI.523410

Amount of Each Receipt this Period

105.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

555.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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for each category of the
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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. STAMBAUGH, WILLIAM S, , ,

Mailing Address 511 N MANCHESTER ST

City
ARLINGTON

State
VA

Zip Code
22203

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 12 / 2016

Transaction ID : SA11AI.522433

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STARNES, LEO, C, MR,

Mailing Address 6540 LITTLE JOE TRL

City
SAN ANTONIO

State
TX

Zip Code
78253

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2016

Transaction ID : SA11AI.521867

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STEIN, RICHARD, M, MR,

Mailing Address 4411 SUWANEE DAM RD STE 220

City
SUWANEE

State
GA

Zip Code
30024

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 23 / 2016

Transaction ID : SA11AI.523412

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

900.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. STEVENS, CHARLES, , ,

Mailing Address 120 HICKORY RD

City
SNEADS FERRY

State
NC

Zip Code
28460

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 16 / 2016

Transaction ID : SA11AI.522946

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STEWART, WILLIAM R., , ,

Mailing Address 418 N MAIN ST.

City
BENTON

State
IL

Zip Code
62812

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : SA11AI.523152

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STEYN, RUTH, , ,

Mailing Address 3356 WHIPPOORWILL LN.

City
OXFORD

State
MS

Zip Code
38655

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

490.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2016

Transaction ID : SA11AI.525889

Amount of Each Receipt this Period

30.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

180.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. STEYN, RUTH, , ,

Mailing Address 3356 WHIPPOORWILL LN.

City
OXFORD

State
MS

Zip Code
38655

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

590.00

Date of Receipt

09 / 09 / 2016

Transaction ID : SA11AI.526226

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STEYN, RUTH, , ,

Mailing Address 3356 WHIPPOORWILL LN.

City
OXFORD

State
MS

Zip Code
38655

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.00

Date of Receipt

09 / 15 / 2016

Transaction ID : SA11AI.526567

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STINSON, JESSE C, , ,

Mailing Address 1241 51ST ST S

City
BIRMINGHAM

State
AL

Zip Code
35222

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

875.00

Date of Receipt

09 / 14 / 2016

Transaction ID : SA11AI.522675

Amount of Each Receipt this Period

200.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

350.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. STORRO, JUDITH, , ,

Mailing Address 33700 N 86TH STREET

City
SCOTTSDALE

State
CA

Zip Code
85266

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 29 / 2016

Transaction ID : SA11AI.527097

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SWEDERSKI, LEONARD, , ,

Mailing Address PO BOX 369

City
SPRING GROVE

State
IL

Zip Code
60081

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SWEDERSKI CONCRETE CONSTRUCTION INC

Occupation (for Individual)
CONCRETE CONSTRUCTION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 26 / 2016

Transaction ID : SA11AI.527069

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SWENSON, JANNETTE, E., MRS.,

Mailing Address 34385 N IRONWOOD RD.

City
SCOTTSDALE

State
AZ

Zip Code
85266

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 06 / 2016

Transaction ID : SA11AI.522121

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

775.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SWIRE, JAMES, , ,

Mailing Address 4 MILL POND LN

City
NEW ROCHELLE

State
NY

Zip Code
10805

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

694.99

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2016

Transaction ID : SA11AI.525890

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SWIRE, JAMES, , ,

Mailing Address 4 MILL POND LN

City
NEW ROCHELLE

State
NY

Zip Code
10805

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

719.99

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2016

Transaction ID : SA11AI.522679

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TAKACS, JOHN, , ,

Mailing Address 366 ROYCROFT AVE

City
LONG BEACH

State
CA

Zip Code
90814

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BOEING

Occupation (for Individual)
ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 21 / 2016

Transaction ID : SA11AI.523262

Amount of Each Receipt this Period

200.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

245.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TANG, JAMES, , ,

Mailing Address 11302 FALLBROOK DR. STE. 304

City
HOUSTON

State
TX

Zip Code
77065

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

CY FAIR PLASTIC SURGERY CENTER

Occupation (for Individual)

PLASTIC SURGEON

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

09 / 07 / 2016

Transaction ID : SA11AI.525960

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TANG, JAMES, , ,

Mailing Address 11302 FALLBROOK DR. STE. 304

City
HOUSTON

State
TX

Zip Code
77065

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

CY FAIR PLASTIC SURGERY CENTER

Occupation (for Individual)

PLASTIC SURGEON

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

09 / 13 / 2016

Transaction ID : SA11AI.526360

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TANG, JAMES, , ,

Mailing Address 11302 FALLBROOK DR. STE. 304

City
HOUSTON

State
TX

Zip Code
77065

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

CY FAIR PLASTIC SURGERY CENTER

Occupation (for Individual)

PLASTIC SURGEON

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

475.00

Date of Receipt

09 / 15 / 2016

Transaction ID : SA11AI.526532

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
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(check only one)

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TANG, JAMES, , ,

Mailing Address 11302 FALLBROOK DR. STE. 304

City
HOUSTONState
TXZip Code
77065FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CY FAIR PLASTIC SURGERY CENTEROccupation (for Individual)
PLASTIC SURGEON

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 09 / 19 / 2016

Transaction ID : SA11AI.526810

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TAYLOR, CLAUDIA, , ,

Mailing Address 13403 TORREY PINES DR

City
AUBURNState
CAZip Code
95602FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 09 / 08 / 2016

Transaction ID : SA11AI.526181

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. THIBODEAU, PAUL, , ,

Mailing Address 14392 HOOVER ST C19

City
WESTMINSTERState
CAZip Code
92683FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

264.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 09 / 13 / 2016

Transaction ID : SA11AI.526426

Amount of Each Receipt this Period

33.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

83.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. THOMPSON, THOMAS, , ,

Mailing Address 12816 BROADMORE ROAD

City
SILVER SPRING

State
MD

Zip Code
20904

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 22 / 2016

Transaction ID : SA11AI.526948

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. THOMPSON, RALPH W, , MR,

Mailing Address 165 TOPAZ DR

City
CHAMBERSBURG

State
PA

Zip Code
17202

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 23 / 2016

Transaction ID : SA11AI.526989

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. THUNDER-HAAB, KETURAH A., , ,

Mailing Address 436 PINE BRAE ST.

City
ANN ARBOR

State
MI

Zip Code
48105

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 12 / 2016

Transaction ID : SA11AI.522440

Amount of Each Receipt this Period

80.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

305.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TIEDEMAN, WALTER, , ,

Mailing Address 11378 EARLYWOOD DR

City
DALLAS

State
TX

Zip Code
75218

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2016

Transaction ID : SA11AI.521872

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TOBEY, MICHAEL, , ,

Mailing Address 43363 WINDROSE

City

LANCASTER

State

CA

Zip Code

93536

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CITY OF LOS ANGELES

Occupation (for Individual)
FIRE CAPTAIN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2016

Transaction ID : SA11AI.526193

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TONEY, WALLACE A., , ,

Mailing Address 1150 S. 6TH ST.

City

SAINT CHARLES

State

MO

Zip Code

63301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2016

Transaction ID : SA11AI.526475

Amount of Each Receipt this Period

30.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

230.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TORRES, JOSE, , ,

Mailing Address 333 LEE DR. APT. 371

City
BATON ROUGE

State
LA

Zip Code
70808

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 29 / 2016

Transaction ID : SA11AI.527098

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TOWSON, MICHAEL W., , ,

Mailing Address 1 BISHOPWOOD CT.

City
SAVANNAH

State
GA

Zip Code
31411

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 16 / 2016

Transaction ID : SA11AI.522957

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TRACY, THEODORE, , ,

Mailing Address 56 CUSHMAN POINT RD.

City
WISCASSET

State
ME

Zip Code
04578

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 01 / 2016

Transaction ID : SA11AI.525859

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

110.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TRAWICK, MARIE, , ,

Mailing Address 221 LAKEWAY DRIVE

City
BENBROOK

State
TX

Zip Code
76126

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
4 TRUST MORTGAGE, INC.

Occupation (for Individual)
SENIOR UNDERWRITER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 06 / 2016

Transaction ID : SA11AI.525955

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TRICE, PHILIP H, , ,

Mailing Address 15615 PRESTON RD APT 1005

City
DALLAS

State
TX

Zip Code
75248

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 12 / 2016

Transaction ID : SA11AI.522444

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TUCKER, ROBERT, , ,

Mailing Address 4509 N CLASSEN BLVD, STE 201

City
OKLAHOMA CITY

State
OK

Zip Code
73118

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 10 / 2016

Transaction ID : SA11AI.526293

Amount of Each Receipt this Period

150.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

300.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TULLIER, ELLIOTT J, , ,

Mailing Address 851 W CONTOUR DR

City
LAKE CHARLES

State
LA

Zip Code
70605

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 16 / 2016

Transaction ID : SA11AI.522958

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TURNBULL, JOHN, D, MR,

Mailing Address PO BOX 407

City
HUBBARD

State
OR

Zip Code
97032

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 14 / 2016

Transaction ID : SA11AI.522688

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TURNER, JOHN, , ,

Mailing Address 4500 LORRAINE AVE

City
DALLAS

State
TX

Zip Code
75205

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 22 / 2016

Transaction ID : SA11AI.526917

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

3575.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. VAN DEVERE, SHIRLEY A, , ,

Mailing Address 3201 CORMANY RD

City
AKRON

State
OH

Zip Code
44319

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 16 / 2016

Transaction ID : SA11AI.522963

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. VAN RENSSLAER, ALEX, , ,

Mailing Address 133 N BEACH RD

City

HOBE SOUND

State

FL

Zip Code

33455

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

09 / 22 / 2016

Transaction ID : SA11AI.526891

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. VOGLER, RICHARD, , ,

Mailing Address 2155 COUNTRYSIDE CIR

City

NAPERVILLE

State

IL

Zip Code

60565

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NAVISTAR

Occupation (for Individual)
ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

09 / 26 / 2016

Transaction ID : SA11AI.523586

Amount of Each Receipt this Period

150.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

750.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WALKER, JEARL D, , ,

Mailing Address 6917 BAL LAKE DR

City
FORT WORTHState
TXZip Code
76116FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NOT EMPLOYEDOccupation (for Individual)
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 09 / 16 / 2016

Transaction ID : SA11AI.522969

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WALKER, JEARL D, , ,

Mailing Address 6917 BAL LAKE DR

City
FORT WORTHState
TXZip Code
76116FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NOT EMPLOYEDOccupation (for Individual)
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016

Transaction ID : SA11AI.523825

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WALLS, LEAH, L., MS.,

Mailing Address 227 E ANAPAMU ST. APT. 268

City
SANTA BARBARAState
CAZip Code
93101FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016

Transaction ID : SA11AI.523426

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

560.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WALSH, THOMAS, J, MR, JR

Mailing Address 3803 DILLON CT

 City
 DOWNERS GROVE

 State
 IL

 Zip Code
 60515

 FEC ID number of contributing
 federal political committee.

C

 Name of Employer (for Individual)
 INFORMATION REQUESTED

 Occupation (for Individual)
 INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 09 / 02 / 2016

Transaction ID : SA11AI.521876

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WALSH, THOMAS, J, MR, JR

Mailing Address 3803 DILLON CT

 City
 DOWNERS GROVE

 State
 IL

 Zip Code
 60515

 FEC ID number of contributing
 federal political committee.

C

 Name of Employer (for Individual)
 INFORMATION REQUESTED

 Occupation (for Individual)
 INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2016

Transaction ID : SA11AI.523266

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WATSON, NORMAN, , ,

Mailing Address P. O. BOX 1437

 City
 CLEARLAKE

 State
 CA

 Zip Code
 95422

 FEC ID number of contributing
 federal political committee.

C

 Name of Employer (for Individual)
 NONE

 Occupation (for Individual)
 RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2016

Transaction ID : SA11AI.526831

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

125.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WEBER, W, PAUL, MR,

Mailing Address 2616 W 154TH ST

City
GARDENA

State
CA

Zip Code
90249

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

368.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : SA11AI.523168

Amount of Each Receipt this Period

160.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WENDLAND, DONALD R, , ,

Mailing Address 6930 JANES RD

City
SAGINAW

State
MI

Zip Code
48601

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYED

Occupation (for Individual)
FARMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2016

Transaction ID : SA11AI.521877

Amount of Each Receipt this Period

350.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WHITING, GLEN, , ,

Mailing Address 440 ZUNI RIVER CIR. SW

City
LOS LUNAS

State
NM

Zip Code
87031

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 23 / 2016

Transaction ID : SA11AI.523429

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

560.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 126 OF 187

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WIDMAN, FRED, , ,

Mailing Address 616 PLYMOUTH ST

City
BUCYRUS

State
OH

Zip Code
44820

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2016

Transaction ID : SA11AI.525823

Amount of Each Receipt this Period

-50.00

☐ Memo Item
CC CHARGEBACK

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WIEDLE, ELIZABETH, , ,

Mailing Address 6014 BEAUMONT AVE.

City
LA JOLLA

State
CA

Zip Code
92037

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 05 / 2016

Transaction ID : SA11AI.525939

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WILCOX, WARREN, , ,

Mailing Address PO BOX 42

City
GUNNISON

State
CO

Zip Code
81230

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 27 / 2016

Transaction ID : SA11AI.527075

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 127 OF 187

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WILLIAMS, EMILY, , ,

Mailing Address 12566 QUESTOVER CT

City
CREVE COUER

State
MO

Zip Code
63141

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2016

Transaction ID : SA11AI.525915

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WINTER, DONALD E, , ,

Mailing Address 7712 APPLE MILL PL

City
LOUISVILLE

State
KY

Zip Code
40228

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 06 / 2016

Transaction ID : SA11AI.522143

Amount of Each Receipt this Period

400.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WOLFANGER, JAMES C, , ,

Mailing Address 1170 PARK ST

City
EAST ATLANTIC BEACH

State
NY

Zip Code
11561

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : SA11AI.523174

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

525.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 128 OF 187

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WOLLGAST, ALVERA, , ,

Mailing Address 13005 OLD HALLS FERRY RD

City
BLACK JACK

State
MO

Zip Code
63033

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY
09 / 02 / 2016

Transaction ID : SA11AI.521732

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WRIGHT, MICHAELON, , ,

Mailing Address 201 W. BIG BEAVER RD. STE. 1420

City
TROY

State
MI

Zip Code
48084

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
TMW ENTERPRISES INC.

Occupation (for Individual)
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4500.00

Date of Receipt

MM / DD / YYYY
09 / 13 / 2016

Transaction ID : SA11AI.526427

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WRIGHT, EVERETT, , ,

Mailing Address 18635 OAK GROVE RD

City
HIDDEN VALLEY LAKE

State
CA

Zip Code
95467

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
09 / 22 / 2016

Transaction ID : SA11AI.521354

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1200.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 129 OF 187

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. YANCEY, JAMES, , ,

Mailing Address 5969 JOSHUA TRAIL

City
CAMATILLO

State
CA

Zip Code
93012

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

MM / DD / YYYY
09 / 29 / 2016

Transaction ID : SA11AI.527096

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. YOUNG, ANNA, , ,

Mailing Address 22505 141ST AVE. SE

City
KENT

State
WA

Zip Code
98042

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY
09 / 08 / 2016

Transaction ID : SA11AI.526190

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. YOUNG, JOSEPH W., , ,

Mailing Address 5745 S. NINEVEH RD.

City
FRANKLIN

State
IN

Zip Code
46131

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

205.00

Date of Receipt

MM / DD / YYYY
09 / 16 / 2016

Transaction ID : SA11AI.522980

Amount of Each Receipt this Period

30.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

80.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 130 OF 187

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. YOUNG, ANNA, , ,

Mailing Address 22505 141ST AVE. SE

City
KENT

State
WA

Zip Code
98042

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 24 / 2016

Transaction ID : SA11AI.527026

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

100.00

80587.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 131 OF 187

(check only one)

☐ 11a ☒ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TEA PARTY OF NEMAHA COUNTY

Mailing Address PO BOX 262

City
JOHNSON

State
NE

Zip Code
68378

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 29 / 2016

Transaction ID : SA11B.521183

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

100.00

100.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 132 OF 187
(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HOOSIERS FOR FREEDOM PAC

Mailing Address PO BOX 7841

City
BLOOMINGTON

State
IN

Zip Code
47407

FEC ID number of contributing
federal political committee.

C

C00489773

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 29 / 2016

Transaction ID : SA11C.521185

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

100.00

100.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 133 OF 187

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name (Last, First, Middle Initial)

A. BRABENDER COX

Mailing Address 1218 GRANDVIEW AVE.

City
PITTSBURGHState
PAZip Code
15211Purpose of Disbursement
PAC MEDIA PRODUCTION

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	9			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.52114

Amount of Each Disbursement this Period

5495.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. BRABENDER COX

Mailing Address 1218 GRANDVIEW AVE.

City
PITTSBURGHState
PAZip Code
15211Purpose of Disbursement
PAC COMMUNICATIONS CONSULTING

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	6			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.52117

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. BRIGHTON, AMY, , ,

Mailing Address 1119 GENTRY DR.

City
MEDINAState
OHZip Code
44256Purpose of Disbursement
PAC FIELD CONSULTING

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	6			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.52117

Amount of Each Disbursement this Period

55.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

10550.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 134 OF 187

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name (Last, First, Middle Initial)

A. CREATIVE RESPONSE CONCEPTS

Mailing Address 2760 EISENHOWER AVE. 4TH FL

City
ALEXANDRIAState
VAZip Code
22314Purpose of Disbursement
PAC PRESS RELEASE DISTRIBUTION

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	6			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.51643

Amount of Each Disbursement this Period

2265.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CREATIVE RESPONSE CONCEPTS

Mailing Address 2760 EISENHOWER AVE. 4TH FL

City
ALEXANDRIAState
VAZip Code
22314Purpose of Disbursement
PAC ONLINE ADVERTISING

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	6			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.52117

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. DIRECT CONCEPTSMailing Address 44084 RIVERSIDE PARKWAY
STE. 350City
LANSLOWNEState
VAZip Code
20176Purpose of Disbursement
PAC GRAPHIC DESIGN

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	7			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.51643

Amount of Each Disbursement this Period

100.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

2865.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 135 OF 187

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name (Last, First, Middle Initial)

A. DIRECT CONCEPTSMailing Address 44084 RIVERSIDE PARKWAY
STE. 350City
LANSDOWNEState
VAZip Code
20176Purpose of Disbursement
PAC GRAPHIC DESIGN

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		21		2016

FEC Identification Number

C

Transaction ID : SB21B.52114

Amount of Each Disbursement this Period

475.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DIRECT MAIL PROCESSORS INC.

Mailing Address 1150 CONRAD COURT

City
HAGERSTOWNState
MDZip Code
21740Purpose of Disbursement
PAC PO BOX RENTAL

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		29		2016

FEC Identification Number

C

Transaction ID : SB21B.52118

Amount of Each Disbursement this Period

640.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. EAGLE MAILING

Mailing Address 8511 PHOENIX DR.

City
MANASSASState
VAZip Code
20110Purpose of Disbursement
PAC POSTAGE

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		16		2016

FEC Identification Number

C

Transaction ID : SB21B.52106

Amount of Each Disbursement this Period

15693.17

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

16808.17

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 136 OF 187

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name (Last, First, Middle Initial)

A. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS ROAD

City
FAIRFAXState
VAZip Code
22030Purpose of Disbursement
PAC BANK FEES

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		01		2016

FEC Identification Number

C

Transaction ID : SB21B.51642

Amount of Each Disbursement this Period

9.81

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS ROAD

City
FAIRFAXState
VAZip Code
22030Purpose of Disbursement
PAC BANK FEES

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		01		2016

FEC Identification Number

C

Transaction ID : SB21B.51642

Amount of Each Disbursement this Period

278.76

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. FOLEY & LARDNER LLPMailing Address 3000 K STREET NW
STE. 600City
WASHINGTONState
DCZip Code
20007Purpose of Disbursement
PAC LEGAL FEES

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		06		2016

FEC Identification Number

C

Transaction ID : SB21B.51642

Amount of Each Disbursement this Period

1320.50

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1609.07

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 137 OF 187

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name (Last, First, Middle Initial)

A. GLOBAL PAYMENTS

Mailing Address 10 GLENLAKE PARKWAY NE

City
ATLANTAState
GAZip Code
30328Purpose of Disbursement
PAC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	2			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.51642

Amount of Each Disbursement this Period

633.42

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. GLOBAL PAYMENTS

Mailing Address 10 GLENLAKE PARKWAY NE

City
ATLANTAState
GAZip Code
30328Purpose of Disbursement
PAC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	2			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.51642

Amount of Each Disbursement this Period

135.25

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. L2 POLITICAL

Mailing Address 2500 116TH AVE. NE

City
BELLEVUEState
WAZip Code
98004Purpose of Disbursement
PAC LIST RENTAL

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	3			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.51642

Amount of Each Disbursement this Period

13888.89

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

14657.56

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 138 OF 187

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name (Last, First, Middle Initial)

A. L2 POLITICAL

Mailing Address 2500 116TH AVE. NE

City
BELLEVUEState
WAZip Code
98004Purpose of Disbursement
PAC LIST RENTAL

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	6			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.52113

Amount of Each Disbursement this Period

13888.89

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MAILSMART LOGISTICS

Mailing Address 7160 COLUMBIA GATEWAY DR. STE. 300

City
COLUMBIAState
MDZip Code
21046Purpose of Disbursement
PAC POSTAGE

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	6			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.52106

Amount of Each Disbursement this Period

946.72

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MARTIN, JENNIFER, , MRS.,Mailing Address 2295 TOWNE LAKE PARKWAY
STE. 116-328City
WOODSTOCKState
GAZip Code
30189Purpose of Disbursement
PAC STRATEGY CONSULTING

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	1			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.51642

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

19835.61

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 139 OF 187

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name (Last, First, Middle Initial)

A. MARTIN, JENNIFER, , MRS.,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		30		2016

Mailing Address 2295 TOWNE LAKE PARKWAY
STE. 116-328City
WOODSTOCKState
GAZip Code
30189Purpose of Disbursement
PAC STRATEGY CONSULTING

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB21B.52120

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MVP PRESS LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		07		2016

Mailing Address 43720 TRADE CENTER PLACE STE. 135

City
DULLESState
VAZip Code
20166Purpose of Disbursement
PAC DIRECT MAIL PRODUCTION

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB21B.51643

Amount of Each Disbursement this Period

13982.26

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MVP PRESS LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		21		2016

Mailing Address 43720 TRADE CENTER PLACE STE. 135

City
DULLESState
VAZip Code
20166Purpose of Disbursement
PAC DIRECT MAIL PRODUCTION

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB21B.52114

Amount of Each Disbursement this Period

9923.78

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

28906.04

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 140 OF 187

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name (Last, First, Middle Initial)

A. PATRIOT DATA SERVICESMailing Address 44845 FALCON PL
STE. 101ACity
DULLESState
VAZip Code
20166Purpose of Disbursement
PAC DATA WORK

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y	
0	9				2	1					2	0	1	6

FEC Identification Number

C

Transaction ID : SB21B.52114

Amount of Each Disbursement this Period

300.70

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. POSTMASTER

Mailing Address 475 L'ENFANT PLAZA SW

City
WASHINGTONState
DCZip Code
20260Purpose of Disbursement
PAC PO BOX RENEWAL

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y	
0	9				2	9					2	0	1	6

FEC Identification Number

C

Transaction ID : SB21B.52121

Amount of Each Disbursement this Period

640.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. PROFESSIONAL DATA SERVICES INC.

Mailing Address 824 S MILLEDGE AVE STE 101

City
ATHENSState
GAZip Code
30605Purpose of Disbursement
PAC COMPLIANCE CONSULTING

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y	
0	9				1	9					2	0	1	6

FEC Identification Number

C

Transaction ID : SB21B.52114

Amount of Each Disbursement this Period

4551.06

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

5491.76

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 141 OF 187

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name (Last, First, Middle Initial)

A. REIMER, DIANA, , ,

Mailing Address 1140 NASH AVE.

City
LANSDALEState
PAZip Code
19446Purpose of Disbursement
SEE MEMO

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		26		2016

FEC Identification Number

C

Transaction ID : SB21B.52115

Amount of Each Disbursement this Period

1554.88

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. REIMER, DIANA, , ,

Mailing Address 1140 NASH AVE.

City
LANSDALEState
PAZip Code
19446Purpose of Disbursement
PAC MILEAGE

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		26		2016

FEC Identification Number

C

Transaction ID : SB21B.52115

Amount of Each Disbursement this Period

44.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. RESIDENCE INN

Mailing Address 855 CENTRE STREET

City
RIDGELANDState
MSZip Code
39157Purpose of Disbursement
PAC FACILITY RENTAL

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		26		2016

FEC Identification Number

C

Transaction ID : SB21B.52116

Amount of Each Disbursement this Period

1070.38

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

1554.88

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 142 OF 187

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name (Last, First, Middle Initial)

A. SHONDA WERRY, LLC

Mailing Address 1025 FIRST STREET SE UNIT 310

City
WASHINGTONState
DCZip Code
20003Purpose of Disbursement
PAC FIELD CONSULTING

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		06		2016

FEC Identification Number

C

Transaction ID : SB21B.51643

Amount of Each Disbursement this Period

2132.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 140 SECOND STREET

City
SAN FRANCISCOState
CAZip Code
94105Purpose of Disbursement
PAC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		30		2016

FEC Identification Number

C

Transaction ID : SB21B.52121

Amount of Each Disbursement this Period

2377.23

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. SUNTRUST BANK

Mailing Address PO BOX 4418

City
ATLANTAState
GAZip Code
30302Purpose of Disbursement
PAC BANK FEES

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		15		2016

FEC Identification Number

C

Transaction ID : SB21B.52114

Amount of Each Disbursement this Period

6.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

4515.23

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 143 OF 187

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name (Last, First, Middle Initial)

A. SUNTRUST BANK

Mailing Address PO BOX 4418

City
ATLANTAState
GAZip Code
30302Purpose of Disbursement
PAC BANK FEES

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9				2	1		2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.52115

Amount of Each Disbursement this Period

144.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. TEA PARTY PATRIOTSMailing Address 1025 ROSE CREEK DRIVE
STE. 620-322City
WOODSTOCKState
GAZip Code
30189Purpose of Disbursement
PAC IT SERVICES

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9				1	3		2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.51643

Amount of Each Disbursement this Period

6000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. TEA PARTY PATRIOTSMailing Address 1025 ROSE CREEK DRIVE
STE. 620-322City
WOODSTOCKState
GAZip Code
30189Purpose of Disbursement
PAC VOLUNTEER MOBILIZATION & COORDINATION

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9				1	6		2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.52113

Amount of Each Disbursement this Period

100000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

106144.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 144 OF 187

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

TEA PARTY PATRIOTS CITIZENS FUND

Full Name (Last, First, Middle Initial)

A. THE RICHARD NORMAN COMPANY

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2016

Mailing Address 44084 RIVERSIDE PARKWAY
STE. 360City
LANSDOWNEState
VAZip Code
20176Purpose of Disbursement
PAC DIRECT MAIL FUNDRAISING

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB21B.52115

Amount of Each Disbursement this Period

3611.58

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. TNT DAILEY INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2016

Mailing Address 924 CHERRY ROAD

City
WEST PALM BEACHState
FLZip Code
33409Purpose of Disbursement
PAC FUNDRAISING CONSULTING

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB21B.51644

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. TNT DAILEY INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Mailing Address 924 CHERRY ROAD

City
WEST PALM BEACHState
FLZip Code
33409Purpose of Disbursement
PAC FUNDRAISING CONSULTING

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB21B.52118

Amount of Each Disbursement this Period

13500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

22111.58

TOTAL This Period (last page this line number only).....▶

235048.90

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 145 OF 187
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) TEA PARTY PATRIOTS CITIZENS FUND				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00540898 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on MM / DD / YYYY					
Full Name of Payee <input type="checkbox"/> Memo Item BRABENDER COX				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> MM / DD / YYYY </div>	
Mailing Address 1218 GRANDVIEW AVE.				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">19500.00</div>	
City PITTSBURGH		State PA		Zip Code 15211	
Purpose of Expenditure TELEMARKETING				Category/Type 001	
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,				Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NN	
Calendar Year-To-Date Per Election for Office Sought 139997.90				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input type="checkbox"/> Memo Item BRABENDER COX				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> MM / DD / YYYY </div>	
Mailing Address 1218 GRANDVIEW AVE.				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">19500.00</div>	
City PITTSBURGH		State PA		Zip Code 15211	
Purpose of Expenditure TELEMARKETING				Category/Type 001	
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,				Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NN	
Calendar Year-To-Date Per Election for Office Sought 162473.70				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>(a) SUBTOTAL of Itemized Independent Expenditures</p> <p>(a) SUBTOTAL of Unitemized Independent Expenditures</p> <p>(a) TOTAL Independent Expenditures</p> </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; text-align: right; margin-bottom: 10px;">39000.00</div> <div style="border: 1px solid black; padding: 2px; text-align: right; margin-bottom: 10px;"></div> <div style="border: 1px solid black; padding: 2px; text-align: right;"></div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>KILGORE, PAUL, A, MR.,</u> [Electronically Filed]				Date MM / DD / YYYY <div style="display: flex; justify-content: space-around;"> 10 20 2016 </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 146 OF 187
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) TEA PARTY PATRIOTS CITIZENS FUND				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00540898 </div>							
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on MM / DD / YYYY											
Full Name of Payee <input type="checkbox"/> Memo Item CAMPAIGNHQ				Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 12 / 2016							
Mailing Address 109 WEST FRONT ST.				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">29347.00</div>							
City BROOKLYN		State IA		Zip Code 52211							
Purpose of Expenditure TELEMARKETING				Category/Type 001							
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,				Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NN							
Calendar Year-To-Date Per Election for Office Sought 120497.90				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶							
Full Name of Payee <input type="checkbox"/> Memo Item CREATIVE RESPONSE CONCEPTS				Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 28 / 2016							
Mailing Address 2760 EISENHOWER AVE. 4TH FL				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">300.00</div>							
City ALEXANDRIA		State VA		Zip Code 22314							
Purpose of Expenditure E-MARKETING				Category/Type 001							
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,				Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NN							
Calendar Year-To-Date Per Election for Office Sought 287715.52				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶							
<table style="width: 100%;"> <tr> <td style="width: 60%;">(a) SUBTOTAL of Itemized Independent Expenditures</td> <td style="width: 40%; text-align: right;">▶ 29647.00</td> </tr> <tr> <td>(a) SUBTOTAL of Unitemized Independent Expenditures</td> <td style="text-align: right;">▶ </td> </tr> <tr> <td>(a) TOTAL Independent Expenditures</td> <td style="text-align: right;">▶ </td> </tr> </table>						(a) SUBTOTAL of Itemized Independent Expenditures	▶ 29647.00	(a) SUBTOTAL of Unitemized Independent Expenditures	▶ 	(a) TOTAL Independent Expenditures	▶
(a) SUBTOTAL of Itemized Independent Expenditures	▶ 29647.00										
(a) SUBTOTAL of Unitemized Independent Expenditures	▶ 										
(a) TOTAL Independent Expenditures	▶ 										
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.											
KILGORE, PAUL, A, MR., _____ Signature				Date MM / DD / YYYY 10 / 20 / 2016							

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 147 OF 187
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) TEA PARTY PATRIOTS CITIZENS FUND				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00540898 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>	
Full Name of Payee <input type="checkbox"/> Memo Item DIRECT CONCEPTS			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>		
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">50.00</div>		
City State Zip Code LANSDOWNE VA 20176		Transaction ID : SE.521092 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>			
Purpose of Expenditure GRAPHIC DESIGN		Category/Type <div style="border: 1px solid black; padding: 2px;">001</div>		<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>	
Name of Federal Candidate: KING, STEVE, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: IA		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">4928.18</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <input type="checkbox"/> Memo Item DIRECT CONCEPTS			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>		
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">50.00</div>		
City State Zip Code LANSDOWNE VA 20176		Transaction ID : SE.521093 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>			
Purpose of Expenditure GRAPHIC DESIGN		Category/Type <div style="border: 1px solid black; padding: 2px;">001</div>		<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>	
Name of Federal Candidate: GOHMERT, LOUIE, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: TX		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">4928.18</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures				<div style="border: 1px solid black; padding: 2px; text-align: right;">100.00</div>	
(a) SUBTOTAL of Unitemized Independent Expenditures				<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>	
(a) TOTAL Independent Expenditures				<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>KILGORE, PAUL, A, MR.,</u>			Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>		
[Electronically Filed]			10 20 2016		

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 149 OF 187
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) TEA PARTY PATRIOTS CITIZENS FUND				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00540898 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Full Name of Payee DIRECT CONCEPTS			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination		<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350			Amount		<div style="border: 1px solid black; padding: 2px; text-align: right;">50.00</div>
City State Zip Code LANSDOWNE VA 20176		Purpose of Expenditure GRAPHIC DESIGN		Category/Type <div style="border: 1px solid black; padding: 2px;">001</div>	
Name of Federal Candidate: LEE, MIKE, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought:		<input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: UT
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">4928.20</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶
Full Name of Payee DIRECT CONCEPTS			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination		<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350			Amount		<div style="border: 1px solid black; padding: 2px; text-align: right;">50.00</div>
City State Zip Code LANSDOWNE VA 20176		Purpose of Expenditure GRAPHIC DESIGN		Category/Type <div style="border: 1px solid black; padding: 2px;">001</div>	
Name of Federal Candidate: SHELBY, RICHARD, C., ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought:		<input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: AL
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">4928.20</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures				<div style="border: 1px solid black; padding: 2px; text-align: right;">100.00</div>	
(a) SUBTOTAL of Unitemized Independent Expenditures				<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>	
(a) TOTAL Independent Expenditures				<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>KILGORE, PAUL, A, MR.,</u>			Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		<div style="border: 1px solid black; padding: 2px; text-align: center;">10 20 2016</div>

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 150 OF 187
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) TEA PARTY PATRIOTS CITIZENS FUND	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00540898 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>	

Full Name of Payee <input type="checkbox"/> Memo Item DIRECT CONCEPTS			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>	
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;">50.00</div>	
City LANSLOWNE	State VA	Zip Code 20176		
Purpose of Expenditure GRAPHIC DESIGN		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>		
Name of Federal Candidate: PAUL, RAND, ,			Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: KY	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;">4928.20</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input type="checkbox"/> Memo Item DIRECT CONCEPTS			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>	
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;">50.00</div>	
City LANSLOWNE	State VA	Zip Code 20176		
Purpose of Expenditure GRAPHIC DESIGN		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>		
Name of Federal Candidate: TOOMEY, PATRICK, JOSEPH, ,			Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: PA	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;">4928.20</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	▶	100.00
(a) SUBTOTAL of Unitemized Independent Expenditures	▶	
(a) TOTAL Independent Expenditures	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

KILGORE, PAUL, A, MR.,

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y Y Y

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 151 OF 187
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) TEA PARTY PATRIOTS CITIZENS FUND				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00540898 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on MM / DD / YYYY					
Full Name of Payee <input type="checkbox"/> Memo Item DIRECT CONCEPTS				Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 15 / 2016	
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350				Amount 50.00	
City LANSDOWNE		State VA		Zip Code 20176	
Purpose of Expenditure GRAPHIC DESIGN				Category/Type 001	
Name of Federal Candidate: GLENN, DARRYL, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President State: CO	
Calendar Year-To-Date Per Election for Office Sought 1557.41				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input type="checkbox"/> Memo Item DIRECT CONCEPTS				Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 15 / 2016	
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350				Amount 50.00	
City LANSDOWNE		State VA		Zip Code 20176	
Purpose of Expenditure GRAPHIC DESIGN				Category/Type 001	
Name of Federal Candidate: RUBIO, MARCO, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President State: FL	
Calendar Year-To-Date Per Election for Office Sought 1557.41				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
<div style="display: flex; justify-content: space-between;"> <div> (a) SUBTOTAL of Itemized Independent Expenditures (a) SUBTOTAL of Unitemized Independent Expenditures (a) TOTAL Independent Expenditures </div> <div style="text-align: right;"> 100.00 </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>KILGORE, PAUL, A, MR.,</u>				Date MM / DD / YYYY 10 / 20 / 2016	

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 152 OF 187
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) TEA PARTY PATRIOTS CITIZENS FUND		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00540898 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>	

Full Name of Payee <input type="checkbox"/> Memo Item DONOR BUREAU LLC		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 09 / 15 / 2016 </div>	
Mailing Address 1900 N. CULPEPPER ST.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 29.20 </div>	
City ARLINGTON	State VA	Zip Code 22207	Transaction ID : SE.521082 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 09 / 21 / 2016 </div>
Purpose of Expenditure DONOR SERVICES		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: KING, STEVE, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 04 State: IA	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">4878.18</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input type="checkbox"/> Memo Item DONOR BUREAU LLC		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 09 / 15 / 2016 </div>	
Mailing Address 1900 N. CULPEPPER ST.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 29.20 </div>	
City ARLINGTON	State VA	Zip Code 22207	Transaction ID : SE.521083 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 09 / 21 / 2016 </div>
Purpose of Expenditure DONOR SERVICES		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: GOHMERT, LOUIE, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 01 State: TX	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">4878.18</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;">58.40</div>
(a) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(a) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

KILGORE, PAUL, A, MR.,

Signature

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 10 / 20 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 153 OF 187
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) TEA PARTY PATRIOTS CITIZENS FUND	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00540898 </div>
--	---

 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M /

D D /

Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item DONOR BUREAU LLC			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 1900 N. CULPEPPER ST.			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">29.20</div>	
City ARLINGTON	State VA	Zip Code 22207	Transaction ID : SE.521084 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure DONOR SERVICES		Category/Type <div style="border: 1px solid black; padding: 2px;">001</div>	<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: MEADOWS, MARK, R, ,			Office Sought: <input checked="" type="checkbox"/> House District: 11 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NC	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">4878.18</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input type="checkbox"/> Memo Item DONOR BUREAU LLC			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 1900 N. CULPEPPER ST.			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">29.20</div>	
City ARLINGTON	State VA	Zip Code 22207	Transaction ID : SE.521075 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure DONOR SERVICES		Category/Type <div style="border: 1px solid black; padding: 2px;">001</div>	<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,			Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NN	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">141505.31</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	▶	58.40
(a) SUBTOTAL of Unitemized Independent Expenditures	▶	
(a) TOTAL Independent Expenditures	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

KILGORE, PAUL, A, MR.,

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y Y Y

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 154 OF 187
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) TEA PARTY PATRIOTS CITIZENS FUND				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00540898 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Full Name of Payee <input type="checkbox"/> Memo Item DONOR BUREAU LLC			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address 1900 N. CULPEPPER ST.			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">222.87</div>		
City ARLINGTON	State VA	Zip Code 22207	Transaction ID : SE.521177 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure DONOR SERVICES		Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">001</div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,			Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NN		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">223354.27</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <input type="checkbox"/> Memo Item DONOR BUREAU LLC			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address 1900 N. CULPEPPER ST.			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">29.20</div>		
City ARLINGTON	State VA	Zip Code 22207	Transaction ID : SE.521076 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure DONOR SERVICES		Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">001</div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: LEE, MIKE, , ,			Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: UT		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">4878.20</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;">252.07</div>		
(a) SUBTOTAL of Unitemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
(a) TOTAL Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature KILGORE, PAUL, A, MR.,		[Electronically Filed]		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 155 OF 187
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) TEA PARTY PATRIOTS CITIZENS FUND				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00540898 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on MM / DD / YYYY					
Full Name of Payee <input type="checkbox"/> Memo Item DONOR BUREAU LLC				Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 15 / 2016	
Mailing Address 1900 N. CULPEPPER ST.				Amount 29.20	
City ARLINGTON		State VA		Zip Code 22207	
Purpose of Expenditure DONOR SERVICES				Category/Type 001	
Name of Federal Candidate: SHELBY, RICHARD, C., ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 State: AL	
Calendar Year-To-Date Per Election for Office Sought 4878.20				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input type="checkbox"/> Memo Item DONOR BUREAU LLC				Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 15 / 2016	
Mailing Address 1900 N. CULPEPPER ST.				Amount 29.20	
City ARLINGTON		State VA		Zip Code 22207	
Purpose of Expenditure DONOR SERVICES				Category/Type 001	
Name of Federal Candidate: PAUL, RAND, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 State: KY	
Calendar Year-To-Date Per Election for Office Sought 4878.20				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
<div style="display: flex; justify-content: space-between;"> <div> (a) SUBTOTAL of Itemized Independent Expenditures (a) SUBTOTAL of Unitemized Independent Expenditures (a) TOTAL Independent Expenditures </div> <div style="border: 1px solid black; padding: 5px; width: 200px;"> 58.40 </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>KILGORE, PAUL, A, MR.,</u>				Date MM / DD / YYYY 10 / 20 / 2016	

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 156 OF 187
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) TEA PARTY PATRIOTS CITIZENS FUND				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00540898 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Full Name of Payee <input type="checkbox"/> Memo Item DONOR BUREAU LLC			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
Mailing Address 1900 N. CULPEPPER ST.			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">29.20</div>		
City ARLINGTON	State VA	Zip Code 22207	Transaction ID : SE.521079 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure DONOR SERVICES		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: TOOMEY, PATRICK, JOSEPH, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 State: PA		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">4878.20</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <input type="checkbox"/> Memo Item DONOR BUREAU LLC			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
Mailing Address 1900 N. CULPEPPER ST.			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">29.20</div>		
City ARLINGTON	State VA	Zip Code 22207	Transaction ID : SE.521080 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure DONOR SERVICES		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: GLENN, DARRYL, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 State: CO		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">1507.41</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;">58.40</div>		
(a) SUBTOTAL of Unitemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
(a) TOTAL Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature KILGORE, PAUL, A, MR.,		[Electronically Filed]		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) TEA PARTY PATRIOTS CITIZENS FUND				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00540898 </div>										
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on MM / DD / YYYY														
Full Name of Payee <input type="checkbox"/> Memo Item DONOR BUREAU LLC				Date of Public Distribution/Dissemination <div style="text-align: center;">MM / DD / YYYY</div> <div style="text-align: center;">09 / 15 / 2016</div>										
Mailing Address 1900 N. CULPEPPER ST.				Amount <div style="text-align: right;">29.20</div>										
City ARLINGTON		State VA		Zip Code 22207										
Purpose of Expenditure DONOR SERVICES				Category/Type 001										
Name of Federal Candidate: RUBIO, MARCO, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 State: FL										
Calendar Year-To-Date Per Election for Office Sought				<div style="text-align: right;">1507.41</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶										
Full Name of Payee <input type="checkbox"/> Memo Item EAGLE MAILING				Date of Public Distribution/Dissemination <div style="text-align: center;">MM / DD / YYYY</div> <div style="text-align: center;">09 / 15 / 2016</div>										
Mailing Address 8511 PHOENIX DR.				Amount <div style="text-align: right;">1478.20</div>										
City MANASSAS		State VA		Zip Code 20110										
Purpose of Expenditure POSTAGE				Category/Type 001										
Name of Federal Candidate: KING, STEVE, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 04 State: IA										
Calendar Year-To-Date Per Election for Office Sought				<div style="text-align: right;">4848.98</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶										
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">(a) SUBTOTAL of Itemized Independent Expenditures</td> <td style="width: 5%; text-align: center;">▶</td> <td style="width: 35%; text-align: right;">1507.40</td> </tr> <tr> <td>(a) SUBTOTAL of Unitemized Independent Expenditures</td> <td style="text-align: center;">▶</td> <td></td> </tr> <tr> <td>(a) TOTAL Independent Expenditures</td> <td style="text-align: center;">▶</td> <td></td> </tr> </table>						(a) SUBTOTAL of Itemized Independent Expenditures	▶	1507.40	(a) SUBTOTAL of Unitemized Independent Expenditures	▶		(a) TOTAL Independent Expenditures	▶	
(a) SUBTOTAL of Itemized Independent Expenditures	▶	1507.40												
(a) SUBTOTAL of Unitemized Independent Expenditures	▶													
(a) TOTAL Independent Expenditures	▶													
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.														
Signature <u>KILGORE, PAUL, A, MR.,</u> [Electronically Filed]				Date MM / DD / YYYY <div style="text-align: center;">10 / 20 / 2016</div>										

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 158 OF 187
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) TEA PARTY PATRIOTS CITIZENS FUND	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00540898 </div>
--	--

 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on MM / DD / YYYY

Full Name of Payee <input type="checkbox"/> Memo Item EAGLE MAILING			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div>	
Mailing Address 8511 PHOENIX DR.			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1478.20</div>	
City MANASSAS	State VA	Zip Code 20110	Transaction ID : SE.521073 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div>	
Purpose of Expenditure POSTAGE		Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">001</div>	<div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div>	
Name of Federal Candidate: GOHMERT, LOUIE, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: TX	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">4848.98</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input type="checkbox"/> Memo Item EAGLE MAILING			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div>	
Mailing Address 8511 PHOENIX DR.			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1478.20</div>	
City MANASSAS	State VA	Zip Code 20110	Transaction ID : SE.521074 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div>	
Purpose of Expenditure POSTAGE		Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">001</div>	<div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div>	
Name of Federal Candidate: MEADOWS, MARK, R, ,			Office Sought: <input checked="" type="checkbox"/> House District: 11 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NC	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">4848.98</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	▶	2956.40
(a) SUBTOTAL of Unitemized Independent Expenditures	▶	
(a) TOTAL Independent Expenditures	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

KILGORE, PAUL, A, MR.,

[Electronically Filed]

Date

MM / DD / YYYY

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 159 OF 187
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) TEA PARTY PATRIOTS CITIZENS FUND	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00540898 </div>
--	--

 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on MM / DD / YYYY

Full Name of Payee <input type="checkbox"/> Memo Item EAGLE MAILING			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div>	
Mailing Address 8511 PHOENIX DR.			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1478.21</div>	
City MANASSAS	State VA	Zip Code 20110	Transaction ID : SE.521065 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div>	
Purpose of Expenditure POSTAGE		Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">001</div>	<div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div>	
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,			Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NN	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">141476.11</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input type="checkbox"/> Memo Item EAGLE MAILING			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div>	
Mailing Address 8511 PHOENIX DR.			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1478.21</div>	
City MANASSAS	State VA	Zip Code 20110	Transaction ID : SE.521066 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div>	
Purpose of Expenditure POSTAGE		Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">001</div>	<div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div>	
Name of Federal Candidate: LEE, MIKE, , ,			Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: UT	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">4849.00</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	▶	2956.42
(a) SUBTOTAL of Unitemized Independent Expenditures	▶	
(a) TOTAL Independent Expenditures	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

KILGORE, PAUL, A, MR.,

[Electronically Filed]

Date

MM / DD / YYYY

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 160 OF 187
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) TEA PARTY PATRIOTS CITIZENS FUND				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00540898 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on MM / DD / YYYY					
Full Name of Payee <input type="checkbox"/> Memo Item EAGLE MAILING				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> MM / DD / YYYY </div>	
Mailing Address 8511 PHOENIX DR.				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1478.21</div>	
City MANASSAS		State VA		Zip Code 20110	
Purpose of Expenditure POSTAGE				Category/Type 001	
Name of Federal Candidate: SHELBY, RICHARD, C., ,				Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> District: 00 <input type="checkbox"/> State: AL	
Calendar Year-To-Date Per Election for Office Sought 4849.00				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input type="checkbox"/> Memo Item EAGLE MAILING				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> MM / DD / YYYY </div>	
Mailing Address 8511 PHOENIX DR.				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1478.21</div>	
City MANASSAS		State VA		Zip Code 20110	
Purpose of Expenditure POSTAGE				Category/Type 001	
Name of Federal Candidate: PAUL, RAND, , ,				Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> District: 00 <input type="checkbox"/> State: KY	
Calendar Year-To-Date Per Election for Office Sought 4849.00				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
<div style="display: flex; justify-content: space-between;"> <div> (a) SUBTOTAL of Itemized Independent Expenditures (a) SUBTOTAL of Unitemized Independent Expenditures (a) TOTAL Independent Expenditures </div> <div style="text-align: right;"> <div style="border: 1px solid black; padding: 2px; text-align: right; width: 200px;">2956.42</div> <div style="border: 1px solid black; padding: 2px; text-align: right; width: 200px; height: 20px;"></div> <div style="border: 1px solid black; padding: 2px; text-align: right; width: 200px; height: 20px;"></div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>KILGORE, PAUL, A, MR.,</u>				Date MM / DD / YYYY <div style="display: flex; justify-content: space-around;"> 10 20 2016 </div>	

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 161 OF 187
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) TEA PARTY PATRIOTS CITIZENS FUND				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00540898 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Full Name of Payee <input type="checkbox"/> Memo Item EAGLE MAILING			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address 8511 PHOENIX DR.			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1478.21</div>		
City MANASSAS	State VA	Zip Code 20110	Transaction ID : SE.521069 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure POSTAGE		Category/ Type 001	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: TOOMEY, PATRICK, JOSEPH, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: PA		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">4849.00</div>		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			2016		
Full Name of Payee <input type="checkbox"/> Memo Item EAGLE MAILING			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address 8511 PHOENIX DR.			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1478.21</div>		
City MANASSAS	State VA	Zip Code 20110	Transaction ID : SE.521070 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure POSTAGE		Category/ Type 001	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: GLENN, DARRYL, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: CO		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">1478.21</div>		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			2016		
(a) SUBTOTAL of Itemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;">2956.42</div>		
(a) SUBTOTAL of Unitemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
(a) TOTAL Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature KILGORE, PAUL, A, MR.,		[Electronically Filed]		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
<div style="border: 1px solid black; padding: 2px;">10</div>		<div style="border: 1px solid black; padding: 2px;">20</div>		<div style="border: 1px solid black; padding: 2px;">2016</div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 162 OF 187
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) TEA PARTY PATRIOTS CITIZENS FUND				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00540898 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on MM / DD / YYYY					
Full Name of Payee <input type="checkbox"/> Memo Item EAGLE MAILING				Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 15 / 2016	
Mailing Address 8511 PHOENIX DR.				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">1478.21</div>	
City MANASSAS		State VA		Zip Code 20110	
Purpose of Expenditure POSTAGE				Category/Type 001	
Name of Federal Candidate: RUBIO, MARCO, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 State: FL	
Calendar Year-To-Date Per Election for Office Sought 1478.21				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input type="checkbox"/> Memo Item GROUND FLOOR, LLC				Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 10 / 2016	
Mailing Address 3251 EAGLE WATCH DR.				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">2315.00</div>	
City WOODSTOCK		State GA		Zip Code 30189	
Purpose of Expenditure MEDIA PRODUCTION				Category/Type 001	
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,				<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: 00 State: NN	
Calendar Year-To-Date Per Election for Office Sought 91150.90				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
<div style="display: flex; justify-content: space-between;"> <div> (a) SUBTOTAL of Itemized Independent Expenditures (a) SUBTOTAL of Unitemized Independent Expenditures (a) TOTAL Independent Expenditures </div> <div style="text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block; margin-bottom: 10px;">3793.21</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; margin-bottom: 10px;"></div> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>KILGORE, PAUL, A, MR.,</u>				Date MM / DD / YYYY 10 / 20 / 2016	

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 163 OF 187
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) TEA PARTY PATRIOTS CITIZENS FUND				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00540898 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Full Name of Payee INTEGRAM			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination		<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>
Mailing Address 22695 COMMERCE CENTER COURT			Amount		<div style="border: 1px solid black; padding: 2px; text-align: right;">39950.00</div>
City DULLES		State VA	Zip Code 20166	Transaction ID : SE.521151 Date of Disbursement or Obligation	
Purpose of Expenditure POSTAGE			Category/ Type 001		<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NN
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">202423.70</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶
Full Name of Payee INTEGRAM			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination		<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>
Mailing Address 22695 COMMERCE CENTER COURT			Amount		<div style="border: 1px solid black; padding: 2px; text-align: right;">12141.72</div>
City DULLES		State VA	Zip Code 20166	Transaction ID : SE.521174 Date of Disbursement or Obligation	
Purpose of Expenditure DIRECT MAIL PRODUCTION			Category/ Type 001		<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NN
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">214565.42</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures				<div style="border: 1px solid black; padding: 2px; text-align: right;">52091.72</div>	
(a) SUBTOTAL of Unitemized Independent Expenditures				<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>	
(a) TOTAL Independent Expenditures				<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature KILGORE, PAUL, A, MR.,			Date		<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>
[Electronically Filed]			<div style="border: 1px solid black; padding: 2px; text-align: right;">10 / 20 / 2016</div>		

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 164 OF 187
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) TEA PARTY PATRIOTS CITIZENS FUND				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00540898 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Full Name of Payee <input type="checkbox"/> Memo Item MVP PRESS LLC			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
Mailing Address 43720 TRADE CENTER PLACE STE. 135			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">677.31</div>		
City DULLES	State VA	Zip Code 20166	Transaction ID : SE.521102 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure DIRECT MAIL PRODUCTION		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: KING, STEVE, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: IA		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">5605.49</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <input type="checkbox"/> Memo Item MVP PRESS LLC			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
Mailing Address 43720 TRADE CENTER PLACE STE. 135			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">677.31</div>		
City DULLES	State VA	Zip Code 20166	Transaction ID : SE.521103 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure DIRECT MAIL PRODUCTION		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: GOHMERT, LOUIE, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: TX		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">5605.49</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;">1354.62</div>		
(a) SUBTOTAL of Unitemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
(a) TOTAL Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature KILGORE, PAUL, A, MR.,		[Electronically Filed]		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 165 OF 187
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) TEA PARTY PATRIOTS CITIZENS FUND				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00540898 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on MM / DD / YYYY					
Full Name of Payee <input type="checkbox"/> Memo Item MVP PRESS LLC				Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 15 / 2016	
Mailing Address 43720 TRADE CENTER PLACE STE. 135				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">677.31</div>	
City DULLES		State VA		Zip Code 20166	
Purpose of Expenditure DIRECT MAIL PRODUCTION				Category/Type 001	
Name of Federal Candidate: MEADOWS, MARK, R, ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 11 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NC	
Calendar Year-To-Date Per Election for Office Sought 5605.49				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input type="checkbox"/> Memo Item MVP PRESS LLC				Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 15 / 2016	
Mailing Address 43720 TRADE CENTER PLACE STE. 135				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">677.31</div>	
City DULLES		State VA		Zip Code 20166	
Purpose of Expenditure DIRECT MAIL PRODUCTION				Category/Type 001	
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,				<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NN	
Calendar Year-To-Date Per Election for Office Sought 142232.62				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures				<div style="border: 1px solid black; padding: 2px; display: inline-block;">1354.62</div>	
(a) SUBTOTAL of Unitemized Independent Expenditures				<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
(a) TOTAL Independent Expenditures				<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>KILGORE, PAUL, A, MR.,</u>				Date MM / DD / YYYY 10 / 20 / 2016	

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 166 OF 187
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) TEA PARTY PATRIOTS CITIZENS FUND				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00540898 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Full Name of Payee <input type="checkbox"/> Memo Item MVP PRESS LLC			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address 43720 TRADE CENTER PLACE STE. 135			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">677.30</div>		
City DULLES	State VA	Zip Code 20166	Transaction ID : SE.521096 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure DIRECT MAIL PRODUCTION		Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: LEE, MIKE, , ,			<div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose </div> <div> Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: UT </div> </div>		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">5605.50</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <input type="checkbox"/> Memo Item MVP PRESS LLC			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address 43720 TRADE CENTER PLACE STE. 135			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">677.30</div>		
City DULLES	State VA	Zip Code 20166	Transaction ID : SE.521097 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure DIRECT MAIL PRODUCTION		Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: SHELBY, RICHARD, C., ,			<div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose </div> <div> Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: AL </div> </div>		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">5605.50</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;">1354.60</div>		
(a) SUBTOTAL of Unitemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
(a) TOTAL Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature KILGORE, PAUL, A, MR.,		[Electronically Filed]		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 167 OF 187
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) TEA PARTY PATRIOTS CITIZENS FUND				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00540898 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on MM / DD / YYYY					
Full Name of Payee <input type="checkbox"/> Memo Item MVP PRESS LLC				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div> <div style="display: flex; justify-content: space-between;"> 09 / 15 / 2016 </div>	
Mailing Address 43720 TRADE CENTER PLACE STE. 135				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">677.30</div>	
City DULLES		State VA		Zip Code 20166	
Purpose of Expenditure DIRECT MAIL PRODUCTION				Category/Type 001	
Name of Federal Candidate: PAUL, RAND, , ,				Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: KY	
Calendar Year-To-Date Per Election for Office Sought 5605.50				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input type="checkbox"/> Memo Item MVP PRESS LLC				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div> <div style="display: flex; justify-content: space-between;"> 09 / 15 / 2016 </div>	
Mailing Address 43720 TRADE CENTER PLACE STE. 135				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">677.30</div>	
City DULLES		State VA		Zip Code 20166	
Purpose of Expenditure DIRECT MAIL PRODUCTION				Category/Type 001	
Name of Federal Candidate: TOOMEY, PATRICK, JOSEPH, ,				Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: PA	
Calendar Year-To-Date Per Election for Office Sought 5605.50				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (a) SUBTOTAL of Itemized Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; text-align: right;">1354.60</div> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;"> (a) SUBTOTAL of Unitemized Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; text-align: right;"> </div> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;"> (a) TOTAL Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; text-align: right;"> </div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>KILGORE, PAUL, A, MR.,</u> [Electronically Filed]				Date MM / DD / YYYY <div style="display: flex; justify-content: space-between;"> 10 / 20 / 2016 </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 169 OF 187
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) TEA PARTY PATRIOTS CITIZENS FUND				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00540898 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M / D D / Y Y Y Y Y Y</div> </div>	
Full Name of Payee <input type="checkbox"/> Memo Item PATRIOT DATA SERVICES			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M / D D / Y Y Y Y Y Y</div> </div>		
Mailing Address 44845 FALCON PL STE. 101A			Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 65.37 </div>		
City DULLES	State VA	Zip Code 20166	Transaction ID : SE.521112 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M / D D / Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure DATA WORK		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M / D D / Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: KING, STEVE, , ,			<div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose </div> <div> Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: IA </div> </div>		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 5670.86 </div>		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <input type="checkbox"/> Memo Item PATRIOT DATA SERVICES			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M / D D / Y Y Y Y Y Y</div> </div>		
Mailing Address 44845 FALCON PL STE. 101A			Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 65.37 </div>		
City DULLES	State VA	Zip Code 20166	Transaction ID : SE.521113 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M / D D / Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure DATA WORK		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M / D D / Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: GOHMERT, LOUIE, , ,			<div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose </div> <div> Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: TX </div> </div>		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 5670.86 </div>		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 130.74 </div>		
(a) SUBTOTAL of Unitemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> </div>		
(a) TOTAL Independent Expenditures			<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> </div>		
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Signature KILGORE, PAUL, A, MR.,		[Electronically Filed]		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M / D D / Y Y Y Y Y Y</div> </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 170 OF 187
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) TEA PARTY PATRIOTS CITIZENS FUND				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00540898 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on MM / DD / YYYY					
Full Name of Payee <input type="checkbox"/> Memo Item PATRIOT DATA SERVICES				Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY 09 / 15 / 2016 </div>	
Mailing Address 44845 FALCON PL STE. 101A				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 65.37 </div>	
City DULLES		State VA		Zip Code 20166	
Purpose of Expenditure DATA WORK				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: MEADOWS, MARK, R, ,				Office Sought: <input checked="" type="checkbox"/> House District: 11 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NC	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">5670.86</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input type="checkbox"/> Memo Item PATRIOT DATA SERVICES				Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY 09 / 15 / 2016 </div>	
Mailing Address 44845 FALCON PL STE. 101A				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 65.36 </div>	
City DULLES		State VA		Zip Code 20166	
Purpose of Expenditure DATA WORK				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,				Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NN	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">142297.98</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (a) SUBTOTAL of Itemized Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">130.73</div> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;"> (a) SUBTOTAL of Unitemized Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;"> (a) TOTAL Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>KILGORE, PAUL, A, MR.,</u>				Date MM / DD / YYYY <div style="border: 1px solid black; padding: 2px; display: inline-block;">10 / 20 / 2016</div>	

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 171 OF 187
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) TEA PARTY PATRIOTS CITIZENS FUND				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00540898 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>					
Full Name of Payee <input type="checkbox"/> Memo Item PATRIOT DATA SERVICES				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address 44845 FALCON PL STE. 101A				Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 1110.63 </div>	
City DULLES		State VA		Zip Code 20166	
Purpose of Expenditure DATA WORK				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,				<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: 00 State: NN	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">223131.40</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input type="checkbox"/> Memo Item PATRIOT DATA SERVICES				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address 44845 FALCON PL STE. 101A				Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 65.36 </div>	
City DULLES		State VA		Zip Code 20166	
Purpose of Expenditure DATA WORK				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: LEE, MIKE, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: 00 State: UT	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">5670.86</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (a) SUBTOTAL of Itemized Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 1175.99 </div> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;"> (a) SUBTOTAL of Unitemized Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> </div> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;"> (a) TOTAL Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> </div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>KILGORE, PAUL, A, MR.,</u>				Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 172 OF 187
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) TEA PARTY PATRIOTS CITIZENS FUND				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00540898 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on MM / DD / YYYY					
Full Name of Payee <input type="checkbox"/> Memo Item PATRIOT DATA SERVICES				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> MM / DD / YYYY </div>	
Mailing Address 44845 FALCON PL STE. 101A				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">65.36</div>	
City DULLES		State VA		Zip Code 20166	
Purpose of Expenditure DATA WORK				Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">001</div>	
Name of Federal Candidate: SHELBY, RICHARD, C., ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President State: AL	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">5670.86</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input type="checkbox"/> Memo Item PATRIOT DATA SERVICES				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> MM / DD / YYYY </div>	
Mailing Address 44845 FALCON PL STE. 101A				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">65.36</div>	
City DULLES		State VA		Zip Code 20166	
Purpose of Expenditure DATA WORK				Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">001</div>	
Name of Federal Candidate: PAUL, RAND, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President State: KY	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">5670.86</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (a) SUBTOTAL of Itemized Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; text-align: right;">130.72</div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (a) SUBTOTAL of Unitemized Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; text-align: right;"> </div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (a) TOTAL Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; text-align: right;"> </div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>KILGORE, PAUL, A, MR.,</u>				Date MM / DD / YYYY <div style="display: flex; justify-content: space-around;"> 10 20 2016 </div>	

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 173 OF 187
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) TEA PARTY PATRIOTS CITIZENS FUND				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00540898 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on MM / DD / YYYY					
Full Name of Payee <input type="checkbox"/> Memo Item PATRIOT DATA SERVICES				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div> <div style="display: flex; justify-content: space-between;"> 09 / 15 / 2016 </div>	
Mailing Address 44845 FALCON PL STE. 101A				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">65.36</div>	
City DULLES		State VA		Zip Code 20166	
Purpose of Expenditure DATA WORK				Category/Type 001	
Name of Federal Candidate: TOOMEY, PATRICK, JOSEPH, ,				Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: PA	
Calendar Year-To-Date Per Election for Office Sought 5670.86				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input type="checkbox"/> Memo Item PATRIOT DATA SERVICES				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div> <div style="display: flex; justify-content: space-between;"> 09 / 15 / 2016 </div>	
Mailing Address 44845 FALCON PL STE. 101A				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">65.36</div>	
City DULLES		State VA		Zip Code 20166	
Purpose of Expenditure DATA WORK				Category/Type 001	
Name of Federal Candidate: GLENN, DARRYL, , ,				Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: CO	
Calendar Year-To-Date Per Election for Office Sought 2300.08				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
<div style="display: flex; justify-content: space-between;"> <div> (a) SUBTOTAL of Itemized Independent Expenditures (a) SUBTOTAL of Unitemized Independent Expenditures (a) TOTAL Independent Expenditures </div> <div style="text-align: right;"> <div style="border: 1px solid black; padding: 2px; text-align: right; margin-bottom: 10px;">130.72</div> <div style="border: 1px solid black; padding: 2px; text-align: right; margin-bottom: 10px;"></div> <div style="border: 1px solid black; padding: 2px; text-align: right;"></div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>KILGORE, PAUL, A, MR.,</u>				Date MM / DD / YYYY 10 / 20 / 2016	

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 174 OF 187
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) TEA PARTY PATRIOTS CITIZENS FUND				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00540898 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on MM / DD / YYYY					
Full Name of Payee <input type="checkbox"/> Memo Item PATRIOT DATA SERVICES				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> MM / DD / YYYY </div>	
Mailing Address 44845 FALCON PL STE. 101A				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">65.36</div>	
City DULLES		State VA		Zip Code 20166	
Purpose of Expenditure DATA WORK				Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">001</div>	
Name of Federal Candidate: RUBIO, MARCO, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 State: FL	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">2300.08</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input type="checkbox"/> Memo Item ROBERTSON MAILING LIST COMPANY				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> MM / DD / YYYY </div>	
Mailing Address 21955 CASCADES PARKWAY				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">314.56</div>	
City DULLES		State VA		Zip Code 20166	
Purpose of Expenditure LIST RENTAL				Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">001</div>	
Name of Federal Candidate: KING, STEVE, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 04 State: IA	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">5985.42</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
<div style="display: flex; justify-content: space-between;"> <div> (a) SUBTOTAL of Itemized Independent Expenditures (a) SUBTOTAL of Unitemized Independent Expenditures (a) TOTAL Independent Expenditures </div> <div style="text-align: right;"> <div style="border: 1px solid black; padding: 2px; text-align: right; margin-bottom: 10px;">379.92</div> <div style="border: 1px solid black; padding: 2px; text-align: right; margin-bottom: 10px;"></div> <div style="border: 1px solid black; padding: 2px; text-align: right;"></div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>KILGORE, PAUL, A, MR.,</u>				Date MM / DD / YYYY <div style="display: flex; justify-content: space-around;"> 10 20 2016 </div>	

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 175 OF 187
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) TEA PARTY PATRIOTS CITIZENS FUND				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00540898 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Full Name of Payee <input type="checkbox"/> Memo Item ROBERTSON MAILING LIST COMPANY			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address 21955 CASCADES PARKWAY			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">314.56</div>		
City DULLES	State VA	Zip Code 20166	Transaction ID : SE.521123 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure LIST RENTAL		Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">001</div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: GOHMERT, LOUIE, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: TX		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">5985.42</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <input type="checkbox"/> Memo Item ROBERTSON MAILING LIST COMPANY			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address 21955 CASCADES PARKWAY			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">314.56</div>		
City DULLES	State VA	Zip Code 20166	Transaction ID : SE.521124 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure LIST RENTAL		Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">001</div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: MEADOWS, MARK, R, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 11 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NC		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">5985.42</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;">629.12</div>		
(a) SUBTOTAL of Unitemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
(a) TOTAL Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature KILGORE, PAUL, A, MR.,		[Electronically Filed]		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 176 OF 187
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) TEA PARTY PATRIOTS CITIZENS FUND				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00540898 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Full Name of Payee <input type="checkbox"/> Memo Item ROBERTSON MAILING LIST COMPANY			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address 21955 CASCADES PARKWAY			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">314.56</div>		
City DULLES	State VA	Zip Code 20166	Transaction ID : SE.521115 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure LIST RENTAL		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,			Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NN		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">142612.54</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <input type="checkbox"/> Memo Item ROBERTSON MAILING LIST COMPANY			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address 21955 CASCADES PARKWAY			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">2050.00</div>		
City DULLES	State VA	Zip Code 20166	Transaction ID : SE.521178 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure LIST RENTAL		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,			Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NN		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">225404.27</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;">2364.56</div>		
(a) SUBTOTAL of Unitemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
(a) TOTAL Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature KILGORE, PAUL, A, MR.,		[Electronically Filed]		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 177 OF 187
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) TEA PARTY PATRIOTS CITIZENS FUND				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00540898 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Full Name of Payee <input type="checkbox"/> Memo Item ROBERTSON MAILING LIST COMPANY			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address 21955 CASCADES PARKWAY			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">314.56</div>		
City DULLES	State VA	Zip Code 20166	Transaction ID : SE.521116 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure LIST RENTAL		Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">001</div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: LEE, MIKE, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: UT		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">5985.42</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <input type="checkbox"/> Memo Item ROBERTSON MAILING LIST COMPANY			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address 21955 CASCADES PARKWAY			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">314.56</div>		
City DULLES	State VA	Zip Code 20166	Transaction ID : SE.521117 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure LIST RENTAL		Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">001</div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: SHELBY, RICHARD, C., ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: AL		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">5985.42</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;">629.12</div>		
(a) SUBTOTAL of Unitemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
(a) TOTAL Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature KILGORE, PAUL, A, MR.,		[Electronically Filed]		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 178 OF 187
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) TEA PARTY PATRIOTS CITIZENS FUND				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00540898 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	
Full Name of Payee <input type="checkbox"/> Memo Item ROBERTSON MAILING LIST COMPANY			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>		
Mailing Address 21955 CASCADES PARKWAY			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">314.56</div>		
City DULLES		State VA	Zip Code 20166	Transaction ID : SE.521118 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	
Purpose of Expenditure LIST RENTAL		Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">001</div>	<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>		
Name of Federal Candidate: PAUL, RAND, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: KY	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">5985.42</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <input type="checkbox"/> Memo Item ROBERTSON MAILING LIST COMPANY			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>		
Mailing Address 21955 CASCADES PARKWAY			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">314.56</div>		
City DULLES		State VA	Zip Code 20166	Transaction ID : SE.521119 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	
Purpose of Expenditure LIST RENTAL		Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">001</div>	<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>		
Name of Federal Candidate: TOOMEY, PATRICK, JOSEPH, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: PA	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">5985.42</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;">629.12</div>		
(a) SUBTOTAL of Unitemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
(a) TOTAL Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature KILGORE, PAUL, A, MR.,			[Electronically Filed]	Date <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 179 OF 187
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) TEA PARTY PATRIOTS CITIZENS FUND				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00540898 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Full Name of Payee <input type="checkbox"/> Memo Item ROBERTSON MAILING LIST COMPANY			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
Mailing Address 21955 CASCADES PARKWAY			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">314.56</div>		
City DULLES	State VA	Zip Code 20166	Transaction ID : SE.521120 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure LIST RENTAL		Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">001</div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: GLENN, DARRYL, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 State: CO		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">2614.64</div>		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶					
Full Name of Payee <input type="checkbox"/> Memo Item ROBERTSON MAILING LIST COMPANY			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
Mailing Address 21955 CASCADES PARKWAY			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">314.56</div>		
City DULLES	State VA	Zip Code 20166	Transaction ID : SE.521121 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure LIST RENTAL		Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">001</div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: RUBIO, MARCO, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 State: FL		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">2614.64</div>		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶					
(a) SUBTOTAL of Itemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;">629.12</div>		
(a) SUBTOTAL of Unitemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
(a) TOTAL Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature KILGORE, PAUL, A, MR.,		[Electronically Filed]		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 180 OF 187
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) TEA PARTY PATRIOTS CITIZENS FUND				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00540898 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Full Name of Payee <input type="checkbox"/> Memo Item THE RICHARD NORMAN COMPANY			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
Mailing Address 44084 RIVERSIDE PARKWAY STE. 360			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">361.16</div>		
City LANSLOWNE	State VA	Zip Code 20176	Transaction ID : SE.521132 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure CREATIVE FEES		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: KING, STEVE, , ,			<div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose </div> <div> Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: IA </div> </div>		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">6346.58</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <input type="checkbox"/> Memo Item THE RICHARD NORMAN COMPANY			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
Mailing Address 44084 RIVERSIDE PARKWAY STE. 360			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">361.16</div>		
City LANSLOWNE	State VA	Zip Code 20176	Transaction ID : SE.521133 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure CREATIVE FEES		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: GOHMERT, LOUIE, , ,			<div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose </div> <div> Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: TX </div> </div>		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">6346.58</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;">722.32</div>		
(a) SUBTOTAL of Unitemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
(a) TOTAL Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature KILGORE, PAUL, A, MR.,		[Electronically Filed]		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 181 OF 187
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) TEA PARTY PATRIOTS CITIZENS FUND				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00540898 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Full Name of Payee <input type="checkbox"/> Memo Item THE RICHARD NORMAN COMPANY			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">09</div> <div style="border: 1px solid black; padding: 2px;">15</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>		
Mailing Address 44084 RIVERSIDE PARKWAY STE. 360			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">361.16</div>		
City State Zip Code LANSDOWNE VA 20176		Transaction ID : SE.521134 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">09</div> <div style="border: 1px solid black; padding: 2px;">28</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>			
Purpose of Expenditure CREATIVE FEES			Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>		
Name of Federal Candidate: MEADOWS, MARK, R, ,			<div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose </div> <div> Office Sought: <input checked="" type="checkbox"/> House District: <u>11</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NC</u> </div> </div>		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">6346.58</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <input type="checkbox"/> Memo Item THE RICHARD NORMAN COMPANY			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">09</div> <div style="border: 1px solid black; padding: 2px;">15</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>		
Mailing Address 44084 RIVERSIDE PARKWAY STE. 360			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">361.16</div>		
City State Zip Code LANSDOWNE VA 20176		Transaction ID : SE.521125 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">09</div> <div style="border: 1px solid black; padding: 2px;">28</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>			
Purpose of Expenditure CREATIVE FEES			Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>		
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,			<div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose </div> <div> Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NN</u> </div> </div>		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">142973.70</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;">722.32</div>		
(a) SUBTOTAL of Unitemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
(a) TOTAL Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>KILGORE, PAUL, A, MR.,</u>		[Electronically Filed]		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">20</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 182 OF 187
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) TEA PARTY PATRIOTS CITIZENS FUND				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00540898 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Full Name of Payee <input type="checkbox"/> Memo Item THE RICHARD NORMAN COMPANY			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address 44084 RIVERSIDE PARKWAY STE. 360			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">7455.35</div>		
City LANSDOWNE	State VA	Zip Code 20176	Transaction ID : SE.521175 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure CREATIVE FEES		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,			Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NN		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">222020.77</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <input type="checkbox"/> Memo Item THE RICHARD NORMAN COMPANY			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address 44084 RIVERSIDE PARKWAY STE. 360			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">361.16</div>		
City LANSDOWNE	State VA	Zip Code 20176	Transaction ID : SE.521126 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure CREATIVE FEES		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: LEE, MIKE, , ,			Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: UT		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">6346.58</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;">7816.51</div>		
(a) SUBTOTAL of Unitemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
(a) TOTAL Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>KILGORE, PAUL, A, MR.,</u>		[Electronically Filed]		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 183 OF 187
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) TEA PARTY PATRIOTS CITIZENS FUND				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00540898 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>					
Full Name of Payee <input type="checkbox"/> Memo Item THE RICHARD NORMAN COMPANY				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 44084 RIVERSIDE PARKWAY STE. 360				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 361.16 </div>	
City LANSLOWNE		State VA		Zip Code 20176	
Purpose of Expenditure CREATIVE FEES				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: SHELBY, RICHARD, C., ,				Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: AL	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">6346.58</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input type="checkbox"/> Memo Item THE RICHARD NORMAN COMPANY				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 44084 RIVERSIDE PARKWAY STE. 360				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 361.16 </div>	
City LANSLOWNE		State VA		Zip Code 20176	
Purpose of Expenditure CREATIVE FEES				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: PAUL, RAND, , ,				Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: KY	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">6346.58</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (a) SUBTOTAL of Itemized Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">722.32</div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (a) SUBTOTAL of Unitemized Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (a) TOTAL Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>KILGORE, PAUL, A, MR.,</u>				Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
[Electronically Filed]				10 / 20 / 2016	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 186 OF 187
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) TEA PARTY PATRIOTS CITIZENS FUND	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00540898 </div>
--	---

 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on MM / DD / YYYY

Full Name of Payee <input type="checkbox"/> Memo Item TRACE STRATEGIES LLC			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div> <div style="display: flex; justify-content: space-between;"> 09 / 28 / 2016 </div>		
Mailing Address 411 S. VICTORY ST. STE. 202					
City LITTLE ROCK	State AR	Zip Code 72201	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">57031.25</div>		
Purpose of Expenditure GRASSROOTS CANVASSING			Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">001</div>	Transaction ID : SE.521168 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div> <div style="display: flex; justify-content: space-between;"> 09 / 26 / 2016 </div>	
Name of Federal Candidate: TRUMP, DONALD, J., ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NN	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">282435.52</div>		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			2016		

Full Name of Payee <input type="checkbox"/> Memo Item VICTORY MEDIA GROUP			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div> <div style="display: flex; justify-content: space-between;"> 09 / 28 / 2016 </div>		
Mailing Address 1701 EAST LAKE AVE. STE. 335					
City GLENVIEW	State IL	Zip Code 60025	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">4980.00</div>		
Purpose of Expenditure DOOR HANGERS			Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">001</div>	Transaction ID : SE.521169 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div> <div style="display: flex; justify-content: space-between;"> 09 / 26 / 2016 </div>	
Name of Federal Candidate: TOOMEY, PATRICK, JOSEPH, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: PA	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">68357.83</div>		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			2016		

(a) SUBTOTAL of Itemized Independent Expenditures	▶	62011.25
(a) SUBTOTAL of Unitemized Independent Expenditures	▶	
(a) TOTAL Independent Expenditures	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

KILGORE, PAUL, A, MR.,

[Electronically Filed]

Date

MM / DD / YYYY

10 / 20 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 187 OF 187
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) TEA PARTY PATRIOTS CITIZENS FUND				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00540898 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>	
Full Name of Payee <input type="checkbox"/> Memo Item VICTORY MEDIA GROUP			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>		
Mailing Address 1701 EAST LAKE AVE. STE. 335			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">4980.00</div>		
City GLENVIEW	State IL	Zip Code 60025	Transaction ID : SE.521170 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>		
Purpose of Expenditure DOOR HANGERS		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>		
Name of Federal Candidate: TRUMP, DONALD, J., ,			<div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose </div> <div> Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NN </div> </div>		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">287415.52</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <input type="checkbox"/> Memo Item 			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>		
Mailing Address 			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
City 	State 	Zip Code 	Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>		
Purpose of Expenditure 		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>		
Name of Federal Candidate: 			<div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Support <input type="checkbox"/> Oppose </div> <div> Office Sought: <input type="checkbox"/> House District: <input type="checkbox"/> President <input type="checkbox"/> Senate State: </div> </div>		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures	4980.00
(a) SUBTOTAL of Unitemized Independent Expenditures	
(a) TOTAL Independent Expenditures	287673.01

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature KILGORE, PAUL, A, MR.,

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y Y

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2016